


Last Name:		First Name:		Middle Initial:	OFFICE USE ONLY:
Will Visa or Immigration Status prevent lawful employment? <input type="checkbox"/> Yes <input type="checkbox"/> No			Today's Date:	Date Available:	OFFICE USE ONLY:
Phone: () ()	Alternate Phone: () ()		Email:		Geographical Preference/Limitations:
Position Applied For: <input type="checkbox"/> Pilebuck <input type="checkbox"/> Carpenter <input type="checkbox"/> Crane Operator <input type="checkbox"/> Forklift Operator <input type="checkbox"/> Laborer <input type="checkbox"/> Welder <input type="checkbox"/> Finisher <input type="checkbox"/> Office/Clerical <input type="checkbox"/> Other (specify):					 <p>HAMILTON CONSTRUCTION COMPANY</p> <p>CONTRACTORS & ENGINEERS</p> <p>AN EQUAL OPPORTUNITY EMPLOYER A DRUG FREE WORKPLACE</p> <p>PO Box 659, Springfield, OR 97477 Ph: 541.746.2426 Fx: 541-746-7635 www.hamil.com</p>
Current Address:	Street	City	State	Zip Code	
Former Address:	Street	City	State	Zip Code	

EDUCATION RECORD

High School:	City/State:	Graduate/GED? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree/Certification/Major:
College:	City/State:	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree/Certification/Major:
Other:	City/State:	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree/Certification/Major:

EMPLOYMENT RECORD

EMPLOYER	EMPLOYMENT DATES		POSITION	ELIGIBLE FOR REHIRE
Name	Start	End	Start	<input type="checkbox"/> Yes <input type="checkbox"/> No
Address	End	End	End	
Skills/duties				
Supervisor	Reason for Leaving			

Name	Start	End	Start	<input type="checkbox"/> Yes <input type="checkbox"/> No
Address	End	End	End	
Skills/duties				
Supervisor	Reason for Leaving			

Name	Start	End	Start	<input type="checkbox"/> Yes <input type="checkbox"/> No
Address	End	End	End	
Skills/duties				
Supervisor	Reason for Leaving			

THIS COMPANY IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT UNLAWFULLY DISCRIMINATE ON THE BASIS OF RACE, SEX, AGE, COLOR, RELIGION, NATIONAL ORIGIN, MARITAL STATUS, SEXUAL ORIENTATION, MENTAL OR PHYSICAL DISABILITY, OR ANY OTHER BASIS PROHIBITED BY FEDERAL, STATE, OR LOCAL LAW.

List periods of unemployment of more than 30 days and explain:

PERSONAL DATA

Who referred you to this company (person or organization):

PLEASE LIST ANY OTHER JOB RELATED SKILLS OR LICENSES

ADDITIONAL INFORMATION YOU WOULD LIKE TO PROVIDE

<p>This application form is intended for use in evaluating your qualifications for employment; this is not an employment contract.</p> <p>I certify that the information given by me to Hamilton is true and complete to the best of my knowledge. I understand that, if I am employed, discovery that I gave false or misleading information may result in immediate dismissal.</p> <p>I further certify that I am not engaged in any outside activity or business that could be considered in conflict with Hamilton's interest or those of its customers, nor will I become engaged in such activity or business if employed.</p> <p>In consideration of my employment, I agree that my employment and compensation can be terminated with or without cause, and with or without notice at any time, at the option of either Hamilton or myself. I understand that no representative of Hamilton, other than the President, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.</p> <p>If employed, I further agree that if Hamilton advances any paid leave before it has been accrued, or advances or loans me any money during the course of my employment, or if I lose, damage, or fail to return any firm property the firm is authorized to deduct from my wages sufficient funds to repay such loans or advances or to replace its property.</p> <p>Background screening may be required by some contracting parties before you can perform work in or around their property. Credit background checks may be requested if it is substantially related to the job for which you have applied.</p> <p>After an offer of employment, and prior to reporting to work, you are required to submit to mandatory drug testing and satisfactorily complete such testing. Additional testing of job related skills may be required subsequent to an offer of employment and prior to reporting to work.</p> <p>Applicant Signature: _____ Date: _____</p>

THIS APPLICATION IS VALID FOR 90 DAYS FROM DATE.

Hamilton Construction Co.

Affirmative Action Questionnaire

The purpose of this section is to assist in monitoring Affirmative Action Programs and to aid in complying with any required governmental recordkeeping or periodic reporting. This information is not part of your employment application, and will not be considered in the employment/selection process.

Race

- Hispanic or Latino
- White
- Black or African American
- Native Hawaiian or Other Pacific Islander
- Asian
- American Indian or Alaska Native
- Two or more races

Sex

- Male
- Female

Veteran

- Special Disabled
- Vietnam
- Other _____
- Not Applicable

Hamilton Construction regularly provides employment on Federally funded projects. This above information will help us in compliance with hiring goals and accounting.

I ELECT TO NOT PROVIDE THIS INFORMATION