

O'RORKE CONSTRUCTION SERVICES, INC.



EMPLOYMENT APPLICATION

PERSONAL

Last Name: _____ First Name: _____ MI: _____

At least 18 years old? YES NO

If under 18, can you provide a work permit? YES NO

Address: _____

Phone #: _____ Email: _____

If hired, can you provide proof that you are legally authorized to work in the United States?

YES NO

How were you referred to us?

Advertisement Employee Employment Agency Walk-in Other

List any relatives or friends employed by the company: _____

Relationship: _____

Have you ever been convicted of a criminal offense (felony or misdemeanor)? If yes, please state the nature of the offense(s), date(s), city, state, and disposition below. Note: An affirmative answer will not necessarily result in disqualification for employment.

YES NO

Nature of the offense: _____

EMPLOYMENT

Position Desired: _____ Salary Desired: _____

Days and hours available to work: _____

Are you available for overtime: YES NO

When are you available to begin work: _____

Applicant must be able to climb up and down ladders, reach, push, pull, or carry a minimum of fifty (50) pounds to fulfill this position.

Applicant must provide their own hand tools and belt.

Applicant experienced in framing concrete a plus.

Applicant must have a valid Illinois driver's license.

Are you able to perform the essential functions of the job for which you are applying for?

 YES NO

SKILLS

Can you speak any other language besides English? YES NO

If yes, which language and with what proficiency? _____

Can you operate hand or power tools? YES NO

Which hand or power tools have you had experience with?

Tool _____ Years of experience _____

Tool _____ Years of experience _____

Tool _____ Years of experience _____

Tool _____ Years of experience _____

Can you operate a skid steer or YES NO
man lift?

Equipment _____ Years of experience _____

Equipment _____ Years of experience _____

Have you completed any OSHA safety training courses or had Fall Protection training?

 YES NO

If yes, how many hours completed and year of completion?

List additional skills or training: (what knowledge, special skills and/or individual capabilities do you have which especially prepare you for the position applied for?)

EMPLOYMENT HISTORY

Experience: Please account for all employment within the last seven (7) years, beginning with your current or most recent employer. In addition, indicate any other experience which you believe is relevant to the position for which you are applying (e.g., volunteer experience, military service, experience gained over seven (7) years prior etc.) Attach an additional sheet if extra space is needed.

Company Name: _____
Address: _____ **Phone #:** _____
Supervisor: _____
Dates Employed: From _____ To _____
Job Title: _____
Hours Worked: From _____ To _____
Specific Job Duties: _____
Reason For Leaving: _____
May we contact this employer? YES NO
What is the most important skill demonstrated on this job? _____

Company Name: _____
Address: _____ **Phone #:** _____
Supervisor: _____
Dates Employed: From _____ To _____
Job Title: _____
Hours Worked: From _____ To _____
Specific Job Duties: _____
Reason For Leaving: _____
May we contact this employer? YES NO
What is the most important skill demonstrated on this job? _____

Company Name: _____
Address: _____ **Phone #:** _____
Supervisor: _____
Dates Employed: From _____ To _____
Job Title: _____
Hours Worked: From _____ To _____
Specific Job Duties: _____
Reason For Leaving: _____
May we contact this employer? YES NO
What is the most important skill demonstrated on this job? _____

EDUCATION

High School _____	Graduated	YES	NO
Business or Tech School _____	Graduated	YES	NO
Degree? YES NO	Major Field of Study _____		
Jr. College / University _____	Graduated	YES	NO
Degree? YES NO	Major Field of Study _____		
Other Training? Explain _____			

MILITARY SERVICE

Have you obtained special skills or abilities as the result of service in the military?

YES NO

If yes, provide details of the special skills or abilities: _____

PERSONAL REFERENCES

List two (2) persons NOT related to you who have known you for at least five (5) years.

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

EMERGENCY CONTACTS

List two (2) contacts that may be reached in case of an emergency.

Name: _____ Phone #: _____

Relationship: _____

Name: _____ Phone #: _____

Relationship: _____

APPLICANT'S STATEMENT

(Initial each numbered item as read)

1. _____ The information that I have provided on this application is accurate to the best of my knowledge and may be verified by the Company or its agents.
2. _____ I authorize all the schools, persons, and organizations named in this application to provide relevant information in their possession or knowledge to the agents of the Company, for use in deciding whether or not to offer me employment and specifically waive any required written notification. I hereby release the Company, my former employers, and all other persons from any and all claims, demands, or liabilities arising out of or in any way related to such inquiry or disclosure.
3. _____ I understand that the Company is committed to maintaining a drug and alcohol-free workplace. Accordingly, I may be subject to a pre-employment blood test, urinalysis, or other drug / alcohol screening. I further understand that if employed, I may be subject to such a drug and alcohol screening if the Company has reasonable suspicion to believe that I am under the influence of a drug or alcohol. My consent to submit to such a test is required as a condition of employment and my refusal to consent shall result in a refusal to hire or, if already employed, termination.
4. _____ I understand and agree that any misrepresentation or omission of facts in this application will be justified for refusal or termination of employment, regardless of the time elapsed before discovery.
5. _____ I understand and agree that the employment for which I am making application is, and is intern to be, at-will and such employment may be terminated at any time with or without cause, without prior notice, by either me or the Company. There will be no agreement, express or implied between the Company and me for any specific period of employment, nor for continuing or long-term employment, unless made in writing, signed by an authorized representative of the Company.
6. _____ I have placed my signature in the space provided below only after I have completed the entire application to the best of my ability and have carefully read the foregoing five (5) statements.

Date

Name

Signature