

In accordance with the requirements of the Immigration Reform and Control Act of 1986, if you are offered employment with our company, you will be required to present proper documentation regarding your right to work as a U.S. Citizen or authorized resident alien.

Morse Construction, Inc.

Employment Application

Date: _____

Name: _____ Telephone: _____
 (First) (Middle) (Last)

Home Address: _____
 (No. and Street) (City) (State) (Zip)

In Case of Emergency Contact: _____
 (Name) (Phone)

Position Applying For: _____ Date Available: _____

Do you have any disability, which may limit your ability to perform the job for which you have applied? _____

If yes, Please explain: _____

Have you ever been convicted of a felony? _____ If yes, give particulars: _____

EMPLOYMENT (Including military work history)								
Employer & Address (list most recent first)	Dates Worked				Position, Title & Responsibilities	Salary History	Reason for Leaving	Name of Supervisor
	From		To					
	Mo	Yr	Mo	Yr		Start:		
						Final:		
	Mo	Yr	Mo	Yr		Start:		
						Final:		
	Mo	Yr	Mo	Yr		Start:		
						Final:		
	Mo	Yr	Mo	Yr		Start:		
						Final:		

May we contact your current employer? (Yes / No)

Have you ever been suspended, dismissed or asked to resign from any position? _____

If yes, give particulars: _____

EDUCATION

	Name and Location	Month & Year	Degree or Diploma	Major	Scholastic Standing
High School or Secondary School		From:			
		To:			
College or University		From:			
		To:			
Graduate, Technical or Business School		From:			
		To:			
Other		From:			
		To:			

What work experience have you had that most relates to the position you are applying for:

PERSONAL REFERENCES

Name and Occupation	Address	Telephone Number

Describe any community or other volunteer activities, which you believe are applicable to your qualifications for the position:_____

Permission is granted (Yes / No) to investigate my employment history, education and background and solicit statements or information from any person.

I understand any misrepresentations made by me in filling out this application shall be considered just cause for cancellation of employment. I also agree to give at least (2) weeks written notice if I should desire to terminate my position with your agency.

Signature of Applicant:_____