



An Equal Opportunity Employer

1200 R Street, Suite 150

Sacramento, CA. 95811

(916) 928-7474

APPLICATION FOR EMPLOYMENT

(PLEASE PRINT LEGIBLY)

PERSONAL INFORMATION

Date: _____

Name: _____

Address: _____

Phone: (____) _____ Social Security #: _____

Drivers License #: _____

If related to anyone in our company, state name and department:

Name: _____ Department: _____

Referred By: Advertisement Employment Agency Relative
 Walk - In Friend Other: _____

Have you filed an application here before? Yes No If yes, give date: _____

Have you ever been employed here before? Yes No If yes, give date: _____

Are you employed now? Yes No May we contact your present employer? Yes No

On what date are you available to work? _____ Can you travel if job requires it? Yes No

Do you have reliable transportation? Yes No

Are you on a lay - off and subject to recall? Yes No

If under 18, can you, after employment, submit a work permit? _____

Can you, after employment, submit verification of your legal right to work in the United States? _____

EDUCATION

Name and location of school:

HIGH SCHOOL: _____

Year Completed: (circle) 9 10 11 12

Did you graduate? Yes No

COLLEGE / UNIVERSITY: _____

Degree Received: _____

Did you graduate? Yes No Subject studied: _____

TRADE SCHOOL: _____

Did you graduate? Yes No Subject Studied: _____

BUSINESS / CORRESPONDENCE SCHOOL: _____

Did you graduate? Yes No Subject Studied: _____

Special training, apprenticeship, skills, and subjects of special study or research work you have accomplished:

FORMER EMPLOYERS

(List employers, starting with the most recent.)

Dates Employed: From: _____ To: _____

Company Name: _____

Address: _____

Phone #: () _____ Supervisor: _____

Position: _____ Reason for Leaving: _____

Work Performed: _____

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Dates Employed: From: _____ To: _____

Company Name: _____

Address: _____

Phone #: (____) _____ Supervisor: _____

Position: _____ Reason for Leaving: _____

Work Performed: _____

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SPECIAL SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience: _____

REFERENCES

Please provide the names of persons willing to provide professional and / or character references for you.

Name: _____

Address: _____

Business: _____ Years Acquainted: _____

Phone Number: (____) _____

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Name: _____

Address: _____

Business: _____

Years Acquainted: _____

Phone Number: (____) _____

NOTIFY IN CASE OF EMERGENCY

In case of an emergency, notify:

1) Name: _____

Phone Number: (____) _____

2) Name: _____

Phone Number: (____) _____

PLEASE CAREFULLY READ THE FOLLOWING STATEMENT BEFORE SIGNING:

I hereby certify that all information contained in this application is true and correct to the best of my knowledge. I further certify that I have not knowingly withheld any information that may adversely affect my chances for employment. I authorize investigation of all statements contained in this application. I understand that falsification; misrepresentation or omission of facts called for will result in immediate dismissal or removal of my application for consideration. I authorize Market One Builders, Inc. to secure information about my experience with former employers, educational institutions and agencies, and for those parties to provide information concerning my experience, releasing all parties from any liability arising there from.

I also authorize all the references that I have provided to give any information concerning my background to the Company that they consider relevant to my consideration for employment. I further release all the above - listed parties from all liability for any damages from furnishing any information, whether I agree or disagree with the form or content of the information.

I understand that the issuance of this Application does not indicate that there are any positions open.

Date: _____

Signature: _____