

## **Firstcall**

3910 SE Capitol Circle, Grimes, IA 50111 Phone: 515-986-9300 | Fax: 515-986-0050 email: <u>info@firstcalliowa.com</u>

## **Employment Application**

			Appli	cant Inforr	nation					
Full Name:							D	Date:		
Address:	Last			First			M.I.			
Address.	Street Addres	SS		Apartment/Unit #						
	 City					Stat	e	ZIP Code		
Phone: (	)		E-	mail Addre	ss:					
Date Availab	le:	Social S	Security No.:			Desired S	alary:	\$		
Position App	lied for:									
Are you a citizen of the United States?			YES NO YES NO If no, are you authorized to work in the U.S.?						YES	NO
Have you ever worked for this company? Have you ever been convicted of a crime, excluding a traffic violation?			YES NO	If yes, wh	en?					
If yes, explain	n:									
			Edu	ıcation						
High School:			Address							
From:		То:	Did you graduate	? TES	NO	Degree:				
College:			Address							
From:		То:	Did you graduate	? TES	NO	Degree:				
Other:			Addres							
From:		То:	Did you graduate	? \( \sum_	NO	Degree:				
			Refe	erences						
Please list th	hree profess	sional references.								
Full Name:				Relations	hip:					
Company:						Phone:	(	)		
Address:										
Full Name:				Relations	hip:					
Company:						Phone:	(	)		
Address:										
Full Name:				Relations	hip:					
Company:						Phone:	(	)		
Address:										

		Prev	ious E	Employ	men	it						
Company:							Phone:	(	)			
Address:		Superviso					ıpervisor:					
Job Title:			Starting Salary:			\$			ng Salary:	\$		
Responsibilities:												
From:	То:	Reaso	n for L	eaving:								
May we contact your prev	eference	?	YES		NO							
Company:							Phone:	(	)			
Address:						Su	ıpervisor:					
Job Title:		St	arting	Salary:	\$			Endi	ng Salary:	\$		
Responsibilities:												
From:	То:	Reaso	n for L	eaving:								
May we contact your previous supervisor for a reference?  YES NO  U												
Company:							Phone:	(	)			
Address:						Su	ıpervisor:					
Job Title:	Starting Salary: \$ Ending Sa					ng Salary:	\$					
Responsibilities:												
From:	То:	Reaso	n for L	eaving:								
May we contact your previous supervisor for a reference?						NO						
		N	lilitary	/ Servic	е							
Branch:						F	rom:		To:			
Rank at Discharge:	Type of Discharge:											
If other than honorable, explain:												
		Phy	sical (	Capabil	ities	5						
Are you able, with or with accommodations, to:	out reasonable											
Stand for a full 8-10 hour	YES	NO 	Work overhead with scaffo			th scaffold	ds and ladders?			YES	NO	
Engage in repetitive bend	ing?	YES	NO	Engage	age in repetitive twisting?			?			YES	NO
Routinely & repetitively lift up to 100 pounds to waist height?			NO	Routinely & repetitively lift up to 50 pounds above your head?							YES	NO

NOTE: You may be asked specific questions, in addition to these about the functions of the particular position you are seeking. Any indication of limitation will NOT preclude employment.

## **Disclaimer and Signature**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Prior to hiring, all applicants are required to provide Firstcall Construction with a copy of his/her current driver's license and a copy of his/her current automobile insurance.

Employment may be conditional upon successful completion of a health examination which includes a drug screen. If an applicant refuses to participate in the health examination or drug screen, the offer of employment will be withdrawn. If alcohol or illegal drugs are detected, no employment will be offered.

Firstcall Construction is an equal opportunity employer. All applicants will be considered without unlawful regard to age, race, color, religion, creed, sex, marital status, national origin, disability, military status, or any other basis protected by law.

Firstcall Construction is an "at will" employer. This means that just as an employee has the right to terminate the employment relationship at any time, with or without reason, the Company retains a similar right.

I acknowledge I have read and understand all of the above terms and I agree with them:

Signature:	Date: