Lehman Construction Agency

Employment Application

		Аррис	ant Informat	ion								
Full Name:							Date:					
Address:	Last	First			М.	I.						
Address.	Street Address						Apartment/Unit #					
	City				Sta	ate	ZIP C	ode				
Phone: ()		E-mail Addres	ss:								
Date Available: Social Security No.:												
Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO If no, are you authorized to work in the U.S.?												
Have you ever worked for this company? YES NO Have you ever worked for this company? If yes, when?												
Have you ev	er been convicted of a	felony?										
If yes, explai	in:											
Education												
High School	•	Addre										
From:	To:	Did you gradua	YES	NO	Degree:							
College:		Addre			20g.00.							
From:	To:	Did you gradua	YES	NO	Degree:							
Other:		Addre			20g.00.							
From:	To:	Did you gradua	YES	NO 	Degree:							
T TOTH.	10.		eferences		Degree.							
Please list t	hree professional refe								1			
Full Name:			Relations	ship:								
Company:					Phone:	()					
Address:						`	,					
Full Name:			Relations	ship:								
Company:					Phone:	()					
Address:												
Full Name:			Relations	ship:								
Company:					Phone:	()					
Address:												

Previous Employment										
Company:				Phone:	()				
Address:				Supervisor:						
Job Title:		Starting Salary:	\$		Endir	ng Salary:	\$			
Responsibilities:										
From:	То:	Reason for Leaving:								
May we contact your pro	evious supervisor for a		NO							
Company:				Phone:	()				
Address:				Supervisor:						
Job Title:		Starting Salary:	\$		Endir	ng Salary:	\$			
Responsibilities:										
From:	То:	Reason for Leaving:								
May we contact your previous supervisor for a reference?										
Company:				Phone:	()				
Address:				Supervisor:						
Job Title:		Starting Salary:	\$		Endir	ng Salary:	\$			
Responsibilities:										
From:	То:	Reason for Leaving:								
May we contact your pre	evious supervisor for a	reference?		NO						
Military Service										
Branch:				From:		To:				
Rank at Discharge:			pe o	f Discharge:						
If other than honorable, explain:										
		Disclaimer and Si	gnat	ture						
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.										
Signature:			Date:							