



# EMPLOYMENT APPLICATION

**Hal Hays Construction, Inc.** (hereinafter referred to as "the Company") is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, national origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, physical or mental disability.

**PERSONAL**

Last Name		First Name		Middle Name
Other Names(s) Used				Cell/Home Phone #
Address		City	State	Zip
E-mail Address		Position Applying for		Referred by
Salary Desired		Required Driver's License Information:		
Do you have a Valid Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No		State Issuing License		
License #		Expiration Date		Class Type
Have you ever interviewed with the Company or its Affiliates before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list date(s), and job title(s)		
Have you ever been employed by the Company or its Affiliates before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list date(s), job title(s) and location(s)		
Do you have any relatives employed by the Company or its Affiliates? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list name(s)		
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No		If you are under age 18, do you have a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have the legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, are you able to provide proof of identity? (Proof of identity and right to work in the U.S. is a condition of employment) <input type="checkbox"/> Yes <input type="checkbox"/> No		

**EDUCATION**

Highest Grade Completed:			
High School _____ years		College, Trade or Business _____ years	
Graduate Studies _____ years			
School	Address	Major Studies	Degree, Diploma, License or Certificate
High School			
College/University			
Vocational, Business, Other			
List Any Professional Designations			
Other Special Knowledge, Skills or Qualifications			
Do you type?		If yes, # of Words Per Minute	
Computer Skills (Hardware & Software)			
List all machines or tools you are proficient in operating			

List all employers in the past 10 years, starting with the most recent. All information must be completed. You may attach a resume, but not in place of completing the required information.

<b>EMPLOYMENT HISTORY</b>			
Employed From / /	Employer Name	Supervisor's Name	
Employed Until / /	Employer Address	Supervisor's Phone #	
Job Title		Reason For Leaving	
Duties and Responsibilities			
Employed From / /	Employer Name	Supervisor's Name	
Employed Until / /	Employer Address	Supervisor's Phone #	
Job Title		Reason For Leaving	
Duties and Responsibilities			
Employed From / /	Employer Name	Supervisor's Name	
Employed Until / /	Employer Address	Supervisor's Phone #	
Job Title		Reason For Leaving	
Duties and Responsibilities			
Employed From / /	Employer Name	Supervisor's Name	
Employed Until / /	Employer Address	Supervisor's Phone #	
Job Title		Reason For Leaving	
Duties and Responsibilities			

## GENERAL

- Yes  No May we contact your current employer for references?
- Yes  No May we contact previous employers listed on your resume if not included on this application?
- Yes  No If hired, will you be able to work overtime and weekends, if necessary?
- Yes  No Will you be able to perform the essential job functions for the position that you are applying for with or without reasonable accommodation?

## CERTIFICATION & AUTHORIZATION

The above information is true and correct. I understand that in the event of my employment by the Company, I shall be subject to dismissal if any information that I have given in this application is false or misleading, or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I authorize the Company to inquire into my educational, professional and past history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Company and will hold the Company and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information.

I understand that nothing in this employment application, the granting of an interview, or my subsequent employment with the Company is intended to create an employment contract between myself and the Company, under which my employment could be terminated only for cause. On the contrary, I understand and agree that if hired my employment can terminate "at will" and may be terminated by me or the Company at any time, for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.

If employed, I will be required to provide the original documents, which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of the form I-9.

I hereby acknowledge that I have read and agreed to the above statements.

---

**Signature**

---

**Date**



## VOLUNTARY EQUAL EMPLOYMENT OPPORTUNITY DISCLOSURE

Various agencies of the United States Government require employers to maintain information on applicants pertaining to factors such as race, sex, and type of position for which an individual applies. The information requested on this sheet is for certain record-keeping requirements, but disclosure of this information is strictly voluntary. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated. The Company does not discriminate against employees or applicants based on sex, race, color, religion, national origin, ancestry, citizenship, pregnancy, age, marital status, medical condition, physical disability, mental disability, sexual orientation, veteran status or any other characteristic protected by law.

### PLEASE PRINT

Name

Date

Job Title

### SEX:

Male

Female

### RACE / ETHNIC DATA:

White (Non-Hispanic)

Native Hawaiian or Pacific Islander (Non-Hispanic)

American Indian or Alaskan Native (Non-Hispanic)

Black (Non-Hispanic)

Hispanic / Latino

Asian (Non-Hispanic)

Two or More Races

Regulations issued by the U.S. Department of Labor with respect to disabled individuals, disabled veterans, and Vietnam Era Veterans require that federal contractors provide an opportunity for self-identification to candidates seeking employment. Such self-identification is submitted on a voluntary and confidential basis, for use only in accordance with regulations, and without subjecting the individual to adverse treatment.

### DISABLED / VETERAN CLASSIFICATION(S):

Disabled Person

Vietnam Era Veteran

Special Disabled Veteran

### EXPLANATION OF THE CATEGORIES:

**American Indian or Alaska Native** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

**Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

**Black or African American** - A person having origins in any of the Black racial groups of Africa.

**Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

**Native Hawaiian or Other Pacific Islander** - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

**Two or More Races** - (Not Hispanic or Latino) All persons who identify with more than one of the above six races.

**White** - A person having origins in any of the original peoples of Europe, the Middle East, or North America.

**Disabled Person** - Federal regulations define a disabled person as one who (1) has a physical or mental impairment which substantially limits one or more of such person's major life activities, (2) has a history of such impairment, or (3) is regarded as having such an impairment.

**Vietnam Era Veteran** - Federal regulations define a veteran of the Vietnam Era as one who (1) served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964 and May 7, 1975, and was discharged or released with other than a dishonorable discharge, or (2) was discharged or released from active duty for a service connected disability if any part of such active duty was performed between August 5, 1964 and May 7, 1975.

**Special Disabled Veteran** - Federal regulations define a special disabled veteran as one who (1) is entitled to compensation under laws administered by the Veterans' Administration for a disability rated 30% or more, or (2) was discharged or released from active duty because of a service-connected disability.

**AN EQUAL OPPORTUNITY EMPLOYER**

## MVR RELEASE CONSENT FORM

In conjunction with my potential employment at \_\_\_\_\_  
("the company"), I \_\_\_\_\_ (applicant) consent to the  
release of my Motor Vehicle Records (MVR) to the company. I understand the company will  
use these records to evaluate my suitability to fulfill driving duties that may be related to the  
position for which I am applying. I also consent to the review, evaluation, and other use of any  
MVR I may have provided to the company.

This consent is given in satisfaction of Public Law 18 USC 2721 et. Seq., "Federal Drivers  
Privacy Protection Act", and is intended to constitute "written consent" as required by this  
Act..

Signed (applicant) \_\_\_\_\_

Date: \_\_\_\_\_

Drivers' License Number: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_