

Landon - Landon Job Application Form

Date of Application: _____

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ Social Security Number: _____

_____ Phone Number (s): _____

Date of Birth: _____

Have you ever filed an application for Landon - Landon? Yes: _____ No: _____
If checked yes, give date: _____

Have you ever been an employee for Landon - Landon? Yes: _____ No: _____
If checked yes, give date: _____

Are you currently employed? Yes: _____ No: _____
If yes, may we contact your present employer? Yes: _____ No: _____

Does your current VISA or Immigration Status prevent you from becoming employed in
this country? Yes: _____ No: _____

Do you have a current drivers license? Yes: _____ No: _____

Do you have any physical limitations that preclude you from performing any work for
which you are being considered? Yes: _____ No: _____

If yes, please describe: _____

Have you been convicted of a felony or misdemeanor
within the last 5 years? Yes: _____ No: _____

If yes, please describe: _____

Position applying for: (circle one) Installer Sales Bookkeeper/ Office

Date available for work: _____

What is your desired salary range? _____

If you have had previous experience in construction, please describe specific skills you have:

Please describe any information that you feel may be helpful to us in considering your application: _____

Education	Name of School/Address	Course of Study	Number of Years Completed	Degree / Diploma
High School				
College				
Other (Specify)				

Work Experience Your decision to include or exclude any organizations which indicate race, color, religion, or other protected status are optional. Please use your most recent employment first.

Employer: _____ Start date: _____

Address: _____ Final date: _____

Starting wage: _____

Final wage: _____

Work Performed: _____

Phone number(s): _____ Manager: _____

Job Title: _____

Reason for leaving: _____

May we contact? Yes: _____ No: _____

Employer: _____	Start date: _____
Address: _____	Final date: _____
_____	Starting wage: _____
_____	Final wage: _____
Work Performed: _____	

Phone number(s): _____	Manager: _____
Job Title: _____	
Reason for leaving: _____	
May we contact? Yes: _____ No: _____	

Employer: _____	Start date: _____
Address: _____	Final date: _____
_____	Starting wage: _____
_____	Final wage: _____
Work Performed: _____	

Phone number(s): _____	Manager: _____
Job Title: _____	
Reason for leaving: _____	
May we contact? Yes: _____ No: _____	

Please explain any gaps in employment: _____

Statement of Applicant:

- I certify that answers given herein are true and complete to the best of my knowledge.
- I give authorization of investigation of all statements contained in this application, as may be necessary in arriving at an employment decision.

Signature: _____ Date: _____