Employment Application

Name:	Last First	MI	SSN:]	Date:
Address:	Street	Apt. No.	(City			Stat	te ZIP
Home Telephone: ()			Daytime Telephone: ()					
E-mail:			Check if under age 18					
Position Applying	Date Available:							
Pay Expected:			Available: ☐ Full-Time ☐ Part-Time ☐ Temporary					
Legally Eligible to	Alien Registration Number:							
Previously Employed by Upper Midwest Athletic Construction? ☐ No ☐ Yes			If yes, name and location of entity and dates worked:					
EDUCATION AND FORMAL TRAINING								
	_	LDUCATION AND I	ORWAL IKA					
School	Name of School City, State	Course of Stu	ıdy C	hecl Ye	k Las		Graduated	d? Diploma, Degree, or Certificate Received?
School High School	Name of School	T	ıdy C	hecl Ye	k Las		☐ Yes	or Certificate
	Name of School	T	ıdy C	hecl Ye comp	k Las ear olete	d		or Certificate
High School College	Name of School	T	ody C	hecl Ye comp	k Las ear olete	d 4	☐ Yes ☐ No ☐ Yes ☐ No	or Certificate
High School	Name of School	T	1 1	heck Yesomr 2 2 2	k Lasear blete	d 4 4 — 4	☐ Yes ☐ No ☐ Yes	or Certificate
High School College Other (Specify)	Name of School	Course of Stu	1 1 1 1	heck Yesomr 2 2 2	k Lasear blete	d 4 4 — 4	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ Yes	or Certificate
High School College Other (Specify) Other education,	Name of School City, State	Course of Stu	1 1 1 III III III III III III III III I	hecl Yesomp 2 2 2	3 3 3	4 	☐ Yes☐ No☐ Yes☐ No☐ Yes☐ No☐ Yes☐ No☐ Yes☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No	or Certificate

EMPLOYMENT HISTORY - THIS SECTION MUST BE ENTIRELY COMPLETED.

Below, list ALL paid or unpaid work experience for the past 15 years, beginning with the most current or most recent job.

Include military experience. Describe each job separately, emphasizing your specific duties and responsibilities including management, supervisory, or other leadership roles. Explain significant breaks in your work experience. If more space is required, attach additional sheets.

				Dates (mm/dd/yy):	
Employer:				From:	To:
Address:				☐ Full-Time	☐ Part-Time
Position Held:				May we contact empl	oyer?
Reason for Separation:					
Supervisor's Name:				Telephone Number:	
Starting Pay: \$	☐ Hourly	☐ Annually	Ending Pay: \$	☐ Hou	rly 🔲 Annually
Duties/Responsibilities:					
				Dates (mm/dd/yy):	
Employer:				From:	To:
Address:				☐ Full-Time	☐ Part-Time
Position Held:				May we contact empl	oyer?
Reason for Separation:					
Supervisor's Name:				Telephone Number:	
Starting Pay: \$	☐ Hourly	☐ Annually	Ending Pay: \$	☐ Hou	rly 🔲 Annually
Duties/Responsibilities:					
				Dates (mm/dd/yy):	
Employer:				From:	To:
Address:				☐ Full-Time	☐ Part-Time
Position Held:				May we contact empl	oyer? ☐ No ☐ Yes
Reason for Separation:					
Supervisor's Name:				Telephone Number:	
Starting Pav: \$	☐ Hourly	☐ Annually	Ending Pay: \$	— Нош	rly □ Annually

Duties/Responsibilities:							
HEALTH: Do you have allergies?							
DRIVER'S LICENSE REQUIREMENTS							
Some positions require a valid driver's license.							
Driver's License Number:		State of Issue:		Date of Birth:			
Has your driver's license ever been suspended or revoked for any reason? Yes No			nere, and why:				
CONVICTIONS/CRIMINAL HISTORY/BACKGROUND CHECKS							
Have you ever been convicted of any violation of the law, other than for minor traffic violations? (A DWI/DUI must be listed.) No Yes If "Yes", Please explain below. (Disclosing information about convictions will not result in automatic disqualification for consideration for employment.)							
List three references (other than relatives) that have	knowl	edge of your work experie	nce an	d abilities:			
Name:			Phor	ne ()			
Name:			Phone ()				
Name:			Phon	ne ()			
Do you currently have relatives or friends working for Upper Midwest Athletic Construction? Yes No If "Yes," Who?: Relationship: Work Location: Would you agree to pre-hiring and random drug testing? Yes No							
How did you learn of this position? Newspap Employee: (Please provide name)		ertisement Websit Walk-in Other:	e	☐ Job Hotline ☐ Friend (Please specify)			
Signature:			Date				