

SANDMAN INC., DBA STAR CONCRETE

APPLICATION FOR EMPLOYMENT

Sandman Inc., dba Star Concrete is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

How were you referred to us?

APPLICANT INFORMATION

Full Name:

Date:

Address:

City:

State:

ZIP:

Phone:

E-mail Address:

Date Available:

Social Security Number:

Salary Requirements:

Position Applied for:

Type of employment desired:

☐ Full Time ☐ Part-Time

Are you authorized to work in the U.S.?

☐ YES ☐ NO

If you are under 18 years of age, can you provide a work permit?

☐ YES ☐ NO

Have you ever worked for this company?

☐ YES ☐ NO

If so, when?

EDUCATION

High School:

Location:

From:

To:

Did you graduate?

☐ Y ☐ N

Degree:

College:

Location:

From:

To:

Did you graduate?

☐ Y ☐ N

Degree:

Other:

Location:

From:

To:

Did you graduate?

☐ Y ☐ N

Degree:

SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS

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PREVIOUS EMPLOYMENT (LIST MOST RECENT FIRST)

Company:	Phone:

Address:	Supervisor:

Job Title:

Responsibilities:

From:	To:	Reason for Leaving:

Company:	Phone:

Address:	Supervisor:

Job Title:

Responsibilities:

From:	To:	Reason for Leaving:

Company:	Phone:

Address:	Supervisor:

Job Title:

Responsibilities:

From:	To:	Reason for Leaving:

MILITARY SERVICE

Branch:	From:	To:

DISCLAIMER AND SIGNATURE

I certify that the facts contained in this application are true and complete to my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize Investigation of all statements contained herein and the references and employers listed above to give you all information concerning my previous employment and any pertinent information they may have and release the company from all liability for any damage that may result from utilization of such information.

I acknowledge that, if employed, both the company and I have the right to terminate the employment relationship at any time, with or without cause or advance notice. The employment-at-will relationship will remain in effect throughout my employment with the company and may not be modified by any oral or implied agreement.

This disclaimer does not permit the release or use of disability-related or medical information into a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

Signature:

Date:
