



8109 Network Drive, Plainfield, IN 46168
Phone 317-839-0520 Fax 317-838-0925

APPLICATION FOR EMPLOYMENT
THIS IS A DRUG-FREE WORKPLACE

It is this Corporation’s fundamental policy to provide equal opportunities in its operations and in all areas of its employment practices and to assure that there shall be no discrimination against any employee or applicant for employment on the grounds of race, color, religion, sex, national origin, age, handicap status, status as a disabled veteran, or veteran of the Vietnam era, except where age and sex are essential bona fide occupational requirements or where handicap is a bona fide occupational disqualification.

(PLEASE PRINT)

Today’s Date _____

LAST NAME			FIRST NAME			MIDDLE		
STREET ADDRESS								
CITY			STATE			ZIP CODE		
PHONE NO:				SOCIAL SECURITY #:				
DRIVER’S LICENSE NUMBER:				STATE:			CLASS	

Position (s) Applied For _____		
Best time to contact you at home is: _____:_____ am/pm		
Have you ever filed an application with us before?		Yes No If yes, give date
Have you ever been employed with us before?		Yes No If yes, give date
If you are under 18 years of age, can you provide required proof of your eligibility to work?		
		Yes No
Are you authorized to work in the U.S.?		Yes No
Are you currently employed?		Yes No
May we contact your present employer?		Yes No
Are you currently on “lay-off” status and subject to recall?		Yes No
Can you travel if a job required it?		Yes No
Date Available to Start:	Days Available:	Hours Available:
Are you available to work:	Full Time Part Time	Temporary/Summer

EMPLOYMENT EXPERIENCE

Start with your present or last job. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other legally protected status.

Employer	Dates Employed		Work Performed
Address	From	To	
Phone Number	Hourly Rate/Salary		
Job Title	Starting	Final	May we Contact? ___yes ___no
Reason for Leaving			Supervisor

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Address	From	To	
Phone Number	Hourly Rate/Salary		
Job Title	Starting	Final	May we Contact: ___yes ___no
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Address	From	To	
Phone Number	Hourly Rate/Salary		
Job Title	Starting	Final	May we Contact: ___yes ___no
Reason for Leaving			Supervisor

ADDITIONAL INFORMATION

Summarize special job-related skills and qualifications acquired from employment or other experience. List professional, trade, business or civic activities and offices held. You may exclude membership, which reveal gender, race, religion, national origin, age, ancestry, disability or other legally protected status.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

_____ Yes

_____ No

SPECIALIZED SKILLS (Skills/Equipment Operated)

Heavy Equipment/
Small Equipment (List)

Office Equipment/Programs (List)

Other (List)

State any additional information you feel may be helpful to us in considering your application.

PERSONAL/PROFESSIONAL REFERENCES (Do not include family members)

1.	Name	Address	Phone #
2.	Name	Address	Phone #
3.	Name	Address	Phone #

Have you ever been convicted of a crime? _____ Yes _____ No.

If yes, list the conviction along with the nature of the crime and the city and state in which it took place. If conviction occurred in the last 5 years, list probation officer. Attach additional sheet if necessary. Information concerning this question will not automatically bar you from employment.

Describe any job-related training received in the United States military.

EDUCATION

School	Name & Address	Course of Study	No. of Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate/ Professional				
Other (Specify)				

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements and references contained in this application for employment, or attached resume, as may be necessary in arriving at an employment decision. I further authorize my past and present employers to furnish this company with my complete records of employment together with the reasons for my separation and any and all other information that such employer may possess concerning me. I hereby release such past and present employer and their officers, employees and agents from any liability or damages that may occur to me by reason of their furnishing such information and similarly release JDH Contracting, Inc. from any damages and liability in connection with this request for use of such information. These statements include my driving records, criminal record, credit record, and any other statements and references that the company may consider.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading representations whether intentional or not, given in my application or interview (s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. I also agree to and understand that the company will have the right during any period of employment to investigate, verify, or re-verify any statements that I have made or represented.

In the event of employment, I also hereby agree to comply with JDH CONTRACTING, INC's drug-testing policy.

Signature of Applicant

Date

Disclosure and Wavier

In accordance with the Fair Credit Reporting Act, JDH Contracting, Inc. hereby notifies you that a consumer report (or an investigative consumer report containing information as to your character, general reputation, personal characteristics, and mode of living may be obtained for employment purposes as part of its pre-employment background investigation or at any time during your employment. Should an investigative consumer report be requested, you will have the right to demand a complete and accurate disclosure of the nature and scope of the report, along with a written summary of your rights under the Fair Credit Reporting Act.

By signing below, you hereby acknowledge receipt of a copy of this disclosure and hereby consent and authorize JDH Contracting, Inc. to obtain a consumer report (or an investigative consumer report) as part of its pre-employment process. If you are hired, this form will remain on file and shall serve as an ongoing authorization for JDH Contracting, Inc. to obtain a consumer report (or an investigative consumer report) at any time during your employment unless such consent is subsequently withdrawn in writing.

Acknowledged and Agreed:

Signature

Date

Please print your name