



Dear Applicant:

Please be advised that Summit Construction Company, LLC has implemented a Drug-Free Workplace Program. Every applicant who has been potentially hired is required to participate in pre-employment drug and alcohol testing. We also require random post-employment with Summit Construction Company, LLC.

Should you have any questions regarding this Drug-Free Workplace Program, please feel free to contact Louie Ciraldo at 330-376-1317.

Sincerely,

Summit Construction Company, LLC

The Management

Note: Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or handicap.

1095 Home Avenue, Akron, Ohio 44310 **P: 330.376.1317 F: 330.376.1702**
4401 Lyman Dr. Suite C, Hilliard, Ohio 43026 **P: 614.876.0617 F: 614.876.0618**

www.summitconstruction.com

“Building Visions into Reality”

COMPANY NAME: _____
 Employment Application

APPLICANT INFORMATION			
Last Name		First	M.I. Date
Street Address			Apartment/Unit #
City		State	ZIP
Phone		E-mail Address	
Date Available	Social Security No.		Desired Salary
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date

Equal Opportunity Information

The information below is **strictly voluntary** and will no way affect the processing of your employment status with this company. This information sheet will *only* be used for statistical purposes. Thank you for your cooperation.

Social Security Number: _____ - _____ - _____

Sex: Male _____

Female _____

Race: Non-Minority/White _____

African American/Black _____

Hispanic/Latino _____

Native American or Alaskan Native _____

Asian/Pacific Islanders _____

Disability: Are you an individual with a physical or mental impairment which substantially limits one or more of your major life activities?

Yes _____

No _____

Special Employment Notice to Disabled Veterans, Vietnam Era Veterans, and Individuals With Physical or Mental Handicaps.

Government Contractors are subject to 38 USC 2012 of the Vietnam Era Veterans Readjustment Act of 1974 which requires that they take affirmative action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam Era, and Section 503 of the Rehabilitation Act of 1973, as amended, which require government contractors to take affirmative action to employ and advance in employment qualified handicapped individuals.

If you are a disabled veteran, or have a physical or mental handicap, you are invited to volunteer this information. The purpose is to provide information regarding proper placement and appropriate accommodation to enable you to perform the job to the best of your ability in a proper and safe manner. This information will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect your consideration for employment.

If you wish to identify, please sign below.

Handicapped Individual _____ Disabled Veteran _____ Vietnam Era Veteran _____

Signed _____