



EMPLOYMENT APPLICATION

Southeast Contracting Services is an Equal Opportunity Employer and Prohibits Discrimination and Harassment of Any Kind: SEC is committed to the equal employment opportunity for all employees and to providing employees with a work environment free of discrimination and harassment. All employment decisions at SEC are based on business needs, job requirements and individual qualifications, without regard to race, color, religion or belief, national, social or ethnic origin, sex (including pregnancy), age, physical, mental or sensory disability, HIV Status, sexual orientation, gender identity and/or expression, marital, civil union or domestic partnership status, past or present military service, family medical history or genetic information, family or parental status, or any other status protected by the laws or regulations in the locations where we operate. SEC will not tolerate discrimination or harassment based on any of these characteristics. SEC encourages applicants of all ages.

Position(s) applied for:		Date of Application: / /
Name (last, first, middle):		
Address (street, city, state, zip):		
Telephone: ()	Cell Phone/Other: ()	Email:
Are you willing to work outside of Texas: Yes No if not specify why:		
If you are under 18 and it is required, can you furnish a work permit?		<input type="checkbox"/> YES <input type="checkbox"/> NO
Are you planning to join the U.S. ARMY/NAVY/SEALS ECT. in the future?		<input type="checkbox"/> YES <input type="checkbox"/> NO
Have you ever been employed here before? If yes, please give dates and positions:		<input type="checkbox"/> YES <input type="checkbox"/> NO
Are you legally eligible for employment in this country?		<input type="checkbox"/> YES <input type="checkbox"/> NO
Date available for work: / /	What is your desired salary range? _____	
Type of employment desired: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/> Educational Co-Op		
Driver's license number required if driving may be required in the job for which you are applying: _____ State: _____		
Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as the nature and gravity of the offense or conduct, the time the time that has passed since the offense, conduct and/or completion of the sentence, and the nature of the job held or sought will be taken into account.		
Have you ever pleaded "guilty" or "no contest" to, or been convicted of a crime? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, please provide date(s) and details:	Are you currently on probation? YES	NO
How often do you report?		

Employment History		
Starting with your most recent employer, provide the following information.		
Employer:	Telephone: ()	Dates Employed (Month/Year): / to /
Address (street, city, state, zip):	Compensation (Starting): \$ per <input type="checkbox"/> Hourly <input type="checkbox"/> Salary	
Starting job title/final job title:	Commission/Bonus/Other Compensation: \$	
Immediate supervisor and title (for most recent position held):	Compensation (Final): \$ per <input type="checkbox"/> Hourly <input type="checkbox"/> Salary	
May we contact for reference? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER	Commission/Bonus/Other Compensation: \$	
Why did you leave?		
Summarize the type of work performed and job responsibilities:		
Employer:	Telephone: ()	Dates Employed (Month/Year): / to /
Address (street, city, state, zip):	Compensation (Starting): \$ per <input type="checkbox"/> Hourly <input type="checkbox"/> Salary	
Starting job title/final job title:	Commission/Bonus/Other Compensation: \$	
Immediate supervisor and title (for most recent position held):	Compensation (Final): \$ per <input type="checkbox"/> Hourly <input type="checkbox"/> Salary	
May we contact for reference? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER	Commission/Bonus/Other Compensation: \$	

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Address (street, city, state, zip):		Compensation (Starting): \$ per <input type="checkbox"/> Hourly <input type="checkbox"/> Salary
Starting job title/final job title:		Commission/Bonus/Other Compensation: \$
Immediate supervisor and title (for most recent position held):		Compensation (Final): \$ per <input type="checkbox"/> Hourly <input type="checkbox"/> Salary
May we contact for reference? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		Commission/Bonus/Other Compensation: \$
Why did you leave?		
Summarize the type of work performed and job responsibilities:		

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying:

Construction Skills (Check appropriate boxes. Include years of experience):

<input type="checkbox"/> Concrete	Years: _____	<input type="checkbox"/> Roofing	Years: _____	<input type="checkbox"/> Masonry	Years: _____
<input type="checkbox"/> Framing	Years: _____	<input type="checkbox"/> Drywall	Years: _____	<input type="checkbox"/> Metal Framing	Years: _____

Educational Background

Starting with your most recent school attended, provide the following information:

School (include City & State)	Years Completed	Completed	GPA/Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other: _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other: _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other: _____		

References

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable list three school or personal references who are *not* related to you.

Name	Title	Relationship to You	Telephone	Number of Years Known

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not lawfully discriminate in employment and no question on this application is used for purpose of limiting or elimination any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and **signed by the employer's president.**

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) **may result in my immediate discharge from the employer's service, whenever it is discovered.**

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant: _____ Date: / /



BACKGROUND DISCLOSURE/AUTHORIZATION

BACKGROUND CHECK DISCLOSURE

I authorize Southeast Contracting Services and Trusted Employees, to conduct a criminal background investigation as part of its volunteer screening and/or selection process.

I understand that failing to meet the standards established for these checks as well as falsification of information on my application may result in disqualification or further consideration of my application.

I certify that all of the statements and answers set forth on the application form are true and complete to the best of my knowledge. I also am aware that records of arrests on pending charges and/or convictions are not an absolute bar to employment. Such information will be used to determine whether the results of the background check reasonably bear on my trustworthiness or my ability to perform the duties of my position in a manner which is safe for Southeast contracting services.

Finally I understand that the results on these background checks will be only used as a basis for an employment decision and will not be shared with any individual or organization outside the company.

Last Name _____ First _____ Middle _____

Maiden Names _____ Years Used _____

Other Names _____ Years Used _____

Social Security Number _____

Driver's License Number _____ State _____

Other Driver's Licenses Held in Past 5 Years (include states) _____

FOR IDENTIFICATION PURPOSES ONLY: Date of Birth ___/___/___ (Month/Day/Year)

Present Street Address _____

City/State/ZIP _____

Signature

_____/_____/_____
Date: (Month/Day/Year)