

10214 N.W. 10th Street Oklahoma City, OK 73127 405-324-6080 Phone * 405-350-1702 Fax

Application for Employment

We are an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, genetics, national origin, age, marital status, veteran status, disability, or any other protected status under applicable Federal or State law. If you elect to include any information denoting race, color, religion, national origin, sex, age, genetics, veteran status, disability or other protected status under applicable Federal or State law, we will not consider said protected status in any employment decision.

PLEASE PRINT Those applicants requiring a reasonable accommodation for the application and/or interview process should notify a representative of Human Resources Department
Position(s) applied for: Date of Application/
lame
address
Former Address, if above is less than 2 years
Celephone # () Other ()
are you older than 18? Yes No Have you been employed here before? Yes No
are you authorized to work in the United States? Yes No (Proof of authorization to work in the U.S. will be required upon hiring)
Date you are eligible for work Type of employment desired: Full Time Part Time Temp/Seasonal
re you able to perform the essential functions of the job for which you are applying, with or without a reasonable occommodation? A job description is available upon request, if not already provided.
are you afraid of heights? Yes No If Yes, please explain:
Do you have your own reliable transportation? Yes No Do you have your own telephone? Yes No
are you able to meet attendance requirements of this position? Yes No
are you on lay off Status, subject to recall? Yes No
Have you been convicted of a felony in the last 7 years? Yes No If Yes, please explain
EMPLOYMENT HISTORY Provide the following information for your <u>past thee</u> (3) employers, assignments or volunteer activities, starting with the most recent.
ROM TO EMPLOYER TELEPHONE
OB TITLE ADDRESS
MMEDIATE SUPERVISOR AND TITLE SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES
EASON FOR LEAVING HOURLY RATE/SALARY:

FINAL_

PER _

PER_

EMPLOYMENT HISTORY (continued)

FROM	ТО	EMPLOYER					TELEPHONE
JOB TITLE	1	ADDRESS					
IMMEDIATE SUPERVISOR AND TITLE		SUMMARIZE THE NATURE OF WO	RK PERFORME	ED AND JOB RESPONS	IBILITIES		
REASON FOR LEAVING		HOURLY RATE/SALARY:					
		START PER		FINAL	PER		
FROM	ТО	EMPLOYER					TELEPHONE
JOB TITLE		ADDRESS					
IMMEDIATE SUPERV	/ISOR AND TITLE	SUMMARIZE THE NATURE OF WO	RK PERFORME	ED AND JOB RESPONS	IBILITIES		
REASON FOR LEAVING		HOURLY RATE/SALARY:					
		START PER		FINAL	PER		
FDUCATION	ONAL BAC	KGROUND (IF JOB REL	(ATED)				
NAME AND LOCATION		YEARS COMPLETED	DID YOU GRADUATE?		COURSE OF STUDY		
HIGH SCHOOL							
COLLEGE			MAJOR	DEGREE			
OTHER							
REFEREN	ICEC (and and		HONE OF 3 R				
NAME			IONE OF SIX			AND ARE NO	T PREVIOUS EMPLOYERS.)
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PEASE READ BEFORE SIGNING

If you have any questions regarding the Applicant's Statement, or any part of this application, please obtain clarification before signing.

Applicant's Statement

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

I authorize verification of all statements contained in this application, resumes, transcripts, letters of reference, interview information, etc. submitted to Employer for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of 60 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 voluntarily give Employer the right to conduct a thorough investigation of my current and past employment, education, credit history, and jobrelated activities. I hereby release from liability Employer and its representatives for seeking such information and all other persons, educational institutions, law enforcement agencies, credit reporting agencies, corporations, organizations, or individuals for furnishing such information.

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 or Employer may terminate the employment relationship at any time with or without cause. It is further acknowledged that the "at will" employment relationship may only be changed by written document which is approved in writing or signed by the President, CEO, or an Authorized Officer of Al Slattery Masonry, Inc., who has been designed as such in writing by the President and/or CEO.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in termination. I understand, also, that I am required to abide by all rules and regulations of the employer.

If employed, I understand and agree to conform to the rules, regulations, and policy guide of Employer. I understand and agree that Employer's rules, regulations, and policy guide may be changed, interpreted, withdrawn, or supplemented at any time without prior notice. I further understand and agree that conforming to Employer's rules, regulations, and the policy guide is a condition of hiring and continued employment.

Employer will provide the Social Security Administration, and if necessary, the Department of Homeland Security and/or other government agencies with information from each new employee's Form I-9 to confirm work authorization.

Signature of Applicant	Date