



Application for Employment

An Equal Employment Opportunity Employer

Instructions

Although this application may be given consideration, its receipt does not imply that there are open positions or that the applicant will be employed. SCHMIDKE CONSTRUCTION reserves its right to withdraw any offer of employment at any time; similarly, the applicant has the right to withdraw this application at any time. If you wish to submit a resume, you may attach it to this application, but in addition, you must complete this application and answer **all** questions, even those which relate to information on your resume. Please be sure that all of your answers on this application are complete, correct, and truthful. You should understand that any omission of relevant information, any false or misleading statement, or any failure to disclose facts which, if known, might reflect unfavorably on this application, may result in dismissal even if you are employed.

Please answer every question. You will not be considered as a candidate for a job with us until we have received this application fully completed and signed by you.

As required by law, SCHMIDKE CONSTRUCTION does not discriminate in hiring or employment on the basis of race, color, religion, national origin, non-disqualifying disability, sex, age, height, weight, or other legally protected characteristic.

DO NOT WRITE IN THIS BLOCK -- FOR EMPLOYER USE ONLY

Date: _____

Interviewed by: _____

Tested (if applicable): Yes No

Tested by: _____

Hired: Yes No Position: _____

Salary/Wage: _____ Exempt: Yes No

Starting Date: _____

Other: _____

Turn page to start application for employment.

Applicant's Information

(First) (Middle) (Last)

(00/00/0000)

Address _____
(Number) (Street)

(_____) _____
Area Code (Telephone No. - Residence)

Apt. or Other _____
(Number) (Street)

(_____) _____
Area Code (Daytime Telephone Number
if different from above)

(City) (State) (Zip)

(Length of Time at Current Address)

List previous addresses within the United States, except military, if your address changed during the past 5 years.
(Start with most recent address.)

No. Street City State Zip From (Date) To (Date)

No. Street City State Zip From (Date) To (Date)

EMPLOYMENT REQUEST

Type of work desired: _____

Specify position(s) for which you are applying (1) _____ (2) _____

Salary Requirements _____ per hours/per week/per annum (circle one)

Kind of work sought? Full-time ___ Part-time ___ If you would be available for part-time work, please list the days of the week and hours you would be available: _____

What shifts are you available to work? Any shift ___ Not first ___ Not Second ___

How were you referred to us? _____ Date available for work? _____

If you applied in response to advertisement, where did you see the ad? _____

Have you applied with us previously? Yes No If yes, when and where? _____

List everyone you know who works for us: _____

Are you able to do the essential functions of the job(s) for which you are applying? Yes No

If no, please identify the applicable functions: _____

ATTENDANCE RECORD

How much time have you lost from work or school during each of the past two calendar years FOR REASONS OTHER THAN VACATION AND HOLIDAYS?

(Year) (No. of Days)

(Year) (No. of Days)

Do you have any activities, commitments, or responsibilities (for example car pooling, school, other employment) which might in any way restrict the hours (including overtime) or days you can work? Yes No. Explain if Yes: _____

EMPLOYMENT RECORD (Please complete your employment history even if a resume is submitted. If you need more space, please continue on the space provided on page 5.)

Are you presently employed? Yes No May we contact your present employer to obtain a reference? Yes No

Starting with PRESENT or MOST RECENT, list all previous employers. Include self-employment, summer, and part-time jobs. Account for periods of unemployment of more than 30 consecutive days by listing "unemployed" under EMPLOYER, and state beginning and ending dates of unemployment.

EMPLOYER (Present or Most Recent)			DATE STARTED	PAY AT START
STREET	CITY	STATE	DATE LEFT	PAY AT LEAVING
SUPERVISOR	DEPT.	TELEPHONE	REASON FOR LEAVING	
YOUR JOB AND RESPONSIBILITIES (Please be specific; describe in detail)				
EMPLOYER			DATE STARTED	PAY AT START
STREET	CITY	STATE	DATE LEFT	PAY AT LEAVING
SUPERVISOR	DEPT.	TELEPHONE	REASON FOR LEAVING	
YOUR JOB AND RESPONSIBILITIES (Please be specific; describe in detail)				
EMPLOYER			DATE STARTED	PAY AT START
STREET	CITY	STATE	DATE LEFT	PAY AT LEAVING
SUPERVISOR	DEPT.	TELEPHONE	REASON FOR LEAVING	
YOUR JOB AND RESPONSIBILITIES (Please be specific; describe in detail)				
EMPLOYER			DATE STARTED	PAY AT START
STREET	CITY	STATE	DATE LEFT	PAY AT LEAVING
SUPERVISOR	DEPT.	TELEPHONE	REASON FOR LEAVING	
YOUR JOB AND RESPONSIBILITIES (Please be specific; describe in detail)				
EMPLOYER			DATE STARTED	PAY AT START
STREET	CITY	STATE	DATE LEFT	PAY AT LEAVING
SUPERVISOR	DEPT.	TELEPHONE	REASON FOR LEAVING	
YOUR JOB AND RESPONSIBILITIES (Please be specific; describe in detail)				

EDUCATION

	Name of School	City and State	Course or Major		Degree
High School(s)			n/a	Last Grade Completed 9 10 11 12	n/a
			n/a	Last Grade Completed 9 10 11 12	n/a
College(s)				Number of Years Completed 1 2 3 4	
				Number of Years Completed 1 2 3 4	
Graduate Studies				Number of Years Completed 1 2 3 4	
Other - Give Type				Number of Years Completed 1 2 3 4	

Vocational or technical courses studied: _____

Business or secretarial courses studied: _____

List any computer software and equipment and other office equipment you can operate proficiently: _____

List any special certification, skills, knowledge, or experience which you feel may be relevant to the job you are seeking:

Are you planning to pursue or are you currently enrolled in any studies or courses? Yes No

If yes, when, where, for what period of time, or for what courses are you enrolled? _____

If you are now employed, why do you want to change your job? _____

Have you ever been fired, dismissed, asked to resign, resigned by mutual agreement, or otherwise been terminated from any job?
 Yes No If yes, what job and why? _____

PERSONAL INFORMATION

Are you 18 years of age or older? Yes No

Have you ever been convicted of any crime other than a routine traffic offense? (Includes a "no contest" or "guilty" plea).

Yes No

If yes, explain: _____

Are you currently under indictment or charged with a felony? Yes No

If yes, explain: _____

Have you ever had an application or surety bond refused? Yes No

REFERENCES

Name	Address	Telephone
_____	_____	(____) _____
_____	_____	(____) _____
_____	_____	(____) _____
_____	_____	_____

(Please use this space below to complete any answers and to provide additional information)

APPLICANT'S CERTIFICATION AND AGREEMENT

PLEASE READ CAREFULLY AND SIGN BELOW IF YOU AGREE TO THESE TERMS OF EMPLOYMENT.

1. **Certification of Truthfulness:** I represent that all my statements in support of my Application for Employment are true and complete. I understand and agree that if SCHMIDKE CONSTRUCTION Company, at any time, should determine that any requested information was withheld by me or any of my statements are false or misleading, I may be discharged.

2. **Employment at Will:** If hired by SCHMIDKE CONSTRUCTION, I agree to comply with all rules, regulations, policies, and communications directed to employees, including any changes made from time to time. I understand that I will be free to resign my employment at any time with or without cause, and with or without prior notice or warning to SCHMIDKE CONSTRUCTION; I agree that SCHMIDKE CONSTRUCTION also may terminate my employment at any time, with or without cause and with or without prior review, notice, or warning.

3. **Limitation on Claims:** I agree that any lawsuit against SCHMIDKE CONSTRUCTION and/or its agents arising out of my employment or termination of employment, including but not limited to claims arising under State or Federal civil rights statutes, must be brought within the following time limits or be forever barred: (a) for lawsuits requiring a Notice of Right to Sue from the EEOC, within 90 days after the EEOC issues that Notice; or (b) for all other lawsuits, within (i) 180 days of the event(s) giving rise to the claim, or (ii) the time limit specified by statute, whichever is shorter. I waive any statute of limitations that exceeds this time limit.

4. **Authorization to Work:** If I am selected for hire, I will be offered employment provided I certify and produce applicable documentation that I am authorized to work as required by the Immigration Reform and Control Act of 1986.

5. **Need For Accommodation:** If I, due to a physical or mental disability, require an accommodation to perform the job for which I may be selected, I understand that I must give SCHMIDKE CONSTRUCTION written notice of that need within 182 days after I know or reasonably should have known that an accommodation is needed. Failure to do so may bar me from alleging that SCHMIDKE CONSTRUCTION has not accommodated me as required by law.

6. **Drug and Alcohol Testing:** I agree to provide SCHMIDKE CONSTRUCTION with appropriate specimens to test for the presence of drugs or other controlled substances if requested to do so for job-related purposes. I understand that decisions concerning my employment will be made as a result of these tests.

7. **Physical Exam and Release of Medical Information:** I understand that any job offer may be conditioned on passing a physical exam. I authorize every medical doctor, physician or other health care provider (HCP) to provide any and all information, including but not limited to medical reports, laboratory reports, X-rays or clinical abstracts relating to my previous health history or employment in connection with any examination, consultation, test or evaluation. I will cooperate in obtaining any additional authorization required by any HCP for release of any information. I hereby release every HCP and every other person, firm, officer, corporation, association, organization or institution which shall comply with the authorization or request made in this respect from any and all liability for disclosure made pursuant to my authorization. I understand that medical information will not be requested from me, my physician or other HCP until a job offer has been made.

8. **Disclosures:** I agree that the contents of any offices, work spaces, desks, computer and computer generated data, any SCHMIDKE CONSTRUCTION property I may be using, and any of my own property I bring onto SCHMIDKE CONSTRUCTION's premises, may be inspected by SCHMIDKE CONSTRUCTION at any time it determines there is reasonable cause to do so, and I waive and promise not to make any claims against SCHMIDKE CONSTRUCTION (or its employees or agents) relating to such inspection. I agree that, except as directed otherwise in writing by SCHMIDKE CONSTRUCTION, I will not disclose to anyone or use for my own purposes, any of SCHMIDKE CONSTRUCTION's confidential or proprietary information, either during or after my employment. I understand and agree that client names and information, financial data, computer information and processes are confidential and proprietary information and I will not make written or other copies or notes regarding these matters except as necessary to perform my job. I agree that if my employment ends, I will deliver to SCHMIDKE CONSTRUCTION all material of any kind that I have relating to its business, including any such copies or notes. I agree that if any of the above commitments by me is ever found to be legally unenforceable as written, the particular agreement concerned shall be limited to allow its enforcement as far as legally possible.

9. **Consideration for Employment:** I agree to the above terms of employment if I am employed by SCHMIDKE CONSTRUCTION. Should I be employed, I understand and agree that these provisions of my employment can be revised only by a signed contract authorized by a written resolution of SCHMIDKE CONSTRUCTION, and that no person at SCHMIDKE CONSTRUCTION other than its President has any authority to offer employment other than on an at-will basis as described above. I understand and agree that, except as provided above, all compensation, benefits, programs, rules, and policies of SCHMIDKE CONSTRUCTION are subject to exception or change at any time as decided by SCHMIDKE CONSTRUCTION in its sole discretion.

I understand that I may take this application form with me to submit at a later time if I choose to do so. I acknowledge by my signature that I have been given adequate time to read, complete, and review my application and this certification, and I have knowingly and voluntarily signed below.

I have read and understand the items listed in the Application for Employment, including this page, and acknowledge that with my signature below.

Date _____, 20____ Signature of Applicant _____

AUTHORIZATION AND WAIVER

This authorization and waiver is part of my written application for employment with SCHMIDKE CONSTRUCTION Company.

I authorize all employers and educational institutions where I am or have been employed or enrolled, and all law enforcement agencies, to disclose to SCHMIDKE CONSTRUCTION any and all information in their possession about my employment history (including disciplinary and other matters), personal background, and/or credit background. I hereby waive written or other notices from all such parties of their release of any such information to SCHMIDKE CONSTRUCTION. I further authorize all educational institutions I have attended to disclose to SCHMIDKE CONSTRUCTION any and all information in their possession regarding my attendance and performance at such institution, including but not limited to: disclosure of any diploma or degree of certification awarded; disclosure of academic information and transcripts; and disclosure of any disciplinary record. I hereby waive written or other notice from such institution of its release of any such information to SCHMIDKE CONSTRUCTION.

I understand that under Michigan’s Bullard-Plawecki Employee-Right-To-Know Act I am entitled to notice of the release of information from my personnel record, and I hereby specifically waive any such notice from any prior employer.

I release all my prior employers and educational institutions, and all law enforcement agencies, from any liability or claim relating to the release of information, records or opinions to SCHMIDKE CONSTRUCTION, or to any employment decisions made by SCHMIDKE CONSTRUCTION as a result thereof.

For purposes of this Authorization and Waiver, a photocopy of my signature shall have the same force and effect as my original signature.

Name _____
(Please Print)

Signature _____

Date _____, 20__