



EMPLOYMENT APPLICATION
An Equal Opportunity Employer

If you have a disability and believe you require accommodation for the disability during the selection process, please contact us to make appropriate arrangements. We will keep applications for 60 days.

Name: _____ Date: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____ Telephone: _____
 Are you a current Bowes Construction Employee? Yes No If Yes, what department? _____

Position Applied For: _____ **Department:** _____
 Have you been given a job description or had the requirements of the job explained to you? Yes No
 Do you understand the job requirements? Yes No
 Can you perform the requirements of the job with or without reasonable accommodations? Yes No

EDUCATION RECORD

Did you graduate from high school or receive a GED certificate? Yes No

School Name	Location	Hours Earned	Diploma, Degree or Certificate	Major Field of Study
Business/Technical/Vocational 1.				
2.				
College/University(Undergraduate) 1.				
2.				
Graduate School				

For positions which require a high school graduation or GED or a college degree, a copy of the high school diploma/GED certificate or college diploma may be required.

LICENSES (Optional, unless required for the position for which you are now applying.)

Please furnish the issuing State, number, and expiration of each unexpired drivers, commercial motor vehicle operator's license or permit that has been issued to you in the lines provided below.

DRIVERS LICENSES, PERMITS, OR REGISTRATIONS (continued)

State	Number	Expiration	License / Permit

Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes No

If so, please explain. _____

Has one ever been suspended? Yes No

If so, please explain. _____

List any special skills you possess and/or equipment you can operate.

OTHER INFORMATION

If you are not a current Bowes Construction employee, have you previously worked for Bowes Construction? Yes No When? _____

Is a relative of yours currently employed by Bowes Construction? Yes No Name: _____

Have you ever been convicted of, pled guilty or nolo contendere to, or been granted deferred adjudication for a felony or any lesser crime, other than a minor traffic infraction? Yes No A conviction or guilty plea will not necessarily disqualify you for this job. If yes, list all such offenses and provide date, name of court, and disposition. You may omit minor violations for which you paid a fine of \$50 or less.

Are you 18 years of age or older? Yes No

EMPLOYMENT HISTORY

Provide information regarding all paid, military, and volunteer work which may be related to the position for which you are applying. Describe your most recent position first; then list other relevant positions in order, working down from the most recent. Use a separate block for each position -- even though with the same organization. List only employment, military service, volunteer work, or training which meets the requirements for this position. Use additional sheets if necessary. Do NOT use references such as "See Resume" in place of completing this section.

May we contact all employers listed? Yes No (Attach a list of any exceptions with an explanation.)

EMPLOYMENT HISTORY (continued)

Present Employer: _____ Present Position: _____
Address: _____ From (Mo./Yr.) _____ To _____
City, State, Zip; _____ Full-Time (30+hrs/wk.) _____ Part-Time (<30hrs/wk.) _____
Supervisor's Name/Title: _____ Telephone: _____ Salary: _____
Related Duties: _____

Reason for Leaving: _____

Past Employer: _____ Present Position: _____
Address: _____ From (Mo./Yr.) _____ To _____
City, State, Zip; _____ Full-Time (30+hrs/wk.) _____ Part-Time (<30hrs/wk.) _____
Supervisor's Name/Title: _____ Telephone: _____ Salary: _____
Related Duties: _____

Reason for Leaving: _____

Past Employer: _____ Present Position: _____
Address: _____ From (Mo./Yr.) _____ To _____
City, State, Zip; _____ Full-Time (30+hrs/wk.) _____ Part-Time (<30hrs/wk.) _____
Supervisor's Name/Title: _____ Telephone: _____ Salary: _____
Related Duties: _____

Reason for Leaving: _____

RELEASE & DOCUMENTATION OF PRE-EMPLOYMENT TESTING INFORMATION BY DRIVER / APPLICANT

Complete this page if you are a commercial driver's license holder only.

Date: _____

To be completed by driver / applicant.

During the past (2) years, have you **tested positive** on a pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by the Department of Transportation (DOT) drug and alcohol testing rules?

Yes No

During the past (2) years, have you **refused to test** on a pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by the Department of Transportation (DOT) drug and alcohol testing rules?

Yes No

If you answered yes to either of the questions above, please provide documentation of your successful completion of the return-to-duty process.

Dated this _____ Day of _____, _____
Name of Driver _____
Signature of Driver _____
Social Security Number _____ Witness _____

AUTHORIZATION

I authorize **Bowes Construction, Inc.** to contact any organization or individual that I have listed on my employment application and/or resume or mentioned in job interviews, and to obtain from them any relevant information regarding my previous employment, education, certificates, licenses, military service, criminal history, characteristics or traits, or other qualifications for employment with **Bowes Construction, Inc.**.

In exchange for **Bowes Construction's** consideration of my employment application, I authorize anyone possessing this information to furnish it to **Bowes Construction** upon request, and I release the individual company or institution and all individuals providing the information or acquiring the information, including **Bowes Construction** from all claims, liability, and damages whatsoever in furnishing, obtaining, or using said information including, but not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.

Additionally, my signature below certifies that the information provided is true and correct to the best of my knowledge.

Signature of Applicant: _____ **Date:** _____
