

**Builder Services Inc. of NC
EMPLOYMENT APPLICATION**

An equal opportunity Employer

This application must be filled out completely in order to be considered for employment.

Please print and do not leave any blank spaces

You may provide a resume, although you must also complete this application.

PERSONAL

Date: _____

Name _____ S.S.# _____

Address _____ City _____ State _____ Zip _____

How long at present address? _____ Home No. _____ Cell phone _____

Email address: _____

Date of Birth: _____ Valid YOUR STATE Driver's License: _____

Have you ever applied for employment with us? Yes No If yes: month & year _____

Position Desired _____ Pay Expected _____

Apart from absence for religious observance, are you available for full-time work? Yes No

Will you work overtime if asked? Yes No

If not, what hours can you work? _____

When will you be available to begin work? _____

Are you 18 year or over? Yes No

Are you legally eligible to be employed in this U.S.? Yes No
(Proof of citizenship or immigration status will be required upon employment.)

GENERAL INFORMATION

List special skills/activities: _____

Have you ever been convicted of a felony/crime in the past 10 years? Yes No
If yes, please explain _____

Have you ever had any traffic Violations, OWI or DWI? Yes No
If yes, please explain _____

Have you ever been terminated from a prior position? Yes No
If yes, please explain _____

REFERENCES

Give names of three persons **not** related to you. Note: these people should have known you for more than 5 years. (*Specify relationship and years acquainted*).

Name	Street, City, Zip	Telephone	Years Acquainted

Your career goals are: _____

EDUCATION

Type of School	Name of School	Addr, City, State, Zip	Circle Years Completed	Major Subject:	Year Completed /Degrees
High School			○ ○ ○ ○		
College			○ ○ ○ ○		
Trade School			○ ○ ○ ○		

MILITARY

Did you serve in the U.S. Armed Forces? Yes No If yes, in what branch? _____

Describe any training received relevant to the position for which you are applying: _____

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS

(Exclude those which may disclose your race, color, religion or national origin)

What other special qualifications related to your employment skills do you have not listed above? _____

Briefly state why you would like to work with our company _____

2-4 outside interests you have _____

OFFICE SKILLS:

- ___ Typing
- ___ MS Word
- ___ MS Excel
- ___ MS Access
- ___ Other software programs

- ___ General Office (please explain):

FIELD EXPERIENCE:

- ___ Framing
- ___ Drywall
- ___ Painting
- ___ Roofing
- ___ Siding
- ___ Carpeting installation
- ___ Ceramic tile
- ___ Please list Power tools you have:

EMPLOYMENT HISTORY

Please give most recent position first.

1. Employer	Dates	Positions & Duties	Reason for Leaving
Name _____	From _____	_____	_____
_____	_____	_____	_____
Address _____	To _____	_____	_____
_____	_____	_____	_____
Phone _____	Starting wage/salary _____	_____	_____
_____	_____	_____	_____
Supervisor _____	Ending pay _____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Employer	Dates	Positions & Duties	Reason for Leaving
Name _____	From _____	_____	_____
_____	_____	_____	_____
Address _____	To _____	_____	_____
_____	_____	_____	_____
Phone _____	Starting wage/salary _____	_____	_____
_____	_____	_____	_____
Supervisor _____	Ending pay _____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Employer	Dates	Positions & Duties	Reason for Leaving
Name _____	From _____		
Address _____	To _____		
Phone _____	Starting wage/salary _____		
Supervisor _____	Ending pay _____		

AFFIDAVIT

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application form or during any interviews may be grounds for my immediate discharge. I hereby authorize the company to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against the individuals for defamation, invasion of privacy or any other reason because of their statements. I agree that, if I am employed, I will abide by all the rules and regulations of the company. I understand that the taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody in the Company is authorized to enter into any written or verbal employment contracts with me for any definite period of time without the express written consent of the President of the Company. I also understand that my employment is "at-will" and maybe terminated by myself or by the company at any time for any reason or no reason at all, with or without prior notice. **Employment contingent on background check.**

<p>We may contact the employers listed above unless you indicate those you do not want us to contact.</p>	<p>Do Not Contact: Employer Number(s) _____ Reason _____ _____</p>
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BY SIGNING THIS APPLICATION FORM, YOU ARE ATTESTING THAT YOU HAVE FULLY READ, UNDERSTOOD AND AGREE TO ALL OF THE STATED INFORMATION.

Signature _____ Date _____