

RC Contractors, LLC

5127 Aurelius Rd Suite C Lansing, MI 48911 517-993-5583 rccontractors.com

APPLICATION FOR EMPLOYMENT

RC Contractors, LLC is an equal opportunity employer. RC Contractors, LLC does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name	Date
Address	
Home Phone #	Mobile Phone #
Are you eligible to work in the U	I.S? <u>Yes</u> No
Are you at least 18 years or old YesNo	er? (If no, you may be required to provide authorization to work.)
Have you ever been terminated No	from employment or asked to resign by an employer?Yes
If yes, please provide company	names and details
Can you work any shift?Ye	sNo If no, explain:
Can you work overtime, includir	ng weekends?YesNo
Are you able to travel in-state a	nd out-of-state?YesNo
Are you able to perform the ess without a reasonable accommo	ential functions of the job for which you are applying, with or dation?YesNo
	EMPLOYMENT DESIRED
Date you can start	Hourly rate/Salary desired
Position desired	

Are you currently employed? _____ If so, may we inquire of your present employer? _____

REFERRAL SOURCE

How did you	hear about us?
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Have you ever worked for RC Contractors, LLC? ____Yes ____No

If yes, explain: _____

Do you know anyone who works for our company? ____Yes ____No

If yes, who? _____

EDUCATION

	Name and location of school	Degree Received	Subjects studied/Major
High School			
College or University			
Trade, Business or Correspondence School			

EMPLOYMENT HISTORY

Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. Incomplete information could disqualify you from further consideration.

From:	То:	Employer Name:	Telephone:	
Job Title:		Address:		
Immediate supervisor and title:		Summarize the nature of work performed and job re	esponsibilities:	
Reason for lea	aving:			
From:	То:	Employer Name:	Telephone:	
Job Title:		Address:		
Immediate supervisor and title:		Summarize the nature of work performed and job responsibilities:		
Reason for lea	aving:			

From:	To:	Employer Name:	Telephone:
Job Title:		Address:	
Immediate supervisor and title:		Summarize the nature of work performed and job responsibilities:	
Reason for leav	ving:		
From:	То:	Employer Name:	Telephone:
Job Title:		Address:	
Immediate supervisor and title:		Summarize the nature of work performed and job responsibilities:	
Reason for leav	ving:		

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

REFERENCES

Give the names of three persons not related to you, whom you have known at least three (3) years.

Name	Address, Phone, & Email	Company	Years Acquainted
1			
2			
3			

Please read carefully before signing

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for RC Contractors, LLC to hire me. If I am hired, I understand that either RC Contractors, LLC or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of RC Contractors, LLC has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to RC Contractors, LLC true and complete information on this application. No requested information has been concealed. I authorize RC

Contractors, LLC to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date _____ Signature _____

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.