



McInnis Brothers Construction, Inc.

119 Pearl Street, Post Office Box 610, Minden, Louisiana 71058
 Phone 318/377-6134; Fax 318/371-9156
employment@mcinnisbrothers.com

APPLICATION FOR EMPLOYMENT

The Company is committed to a policy of equal employment opportunity in hiring and employment. Employment decisions shall comply with all applicable laws prohibiting discrimination in employment, including Title VII of the Civil Rights Act of 1964, the Age Discrimination in Employment Act of 1967, the Americans with Disabilities Act of 1990 and other applicable state laws.

Please answer all questions. If one does not apply, insert N/A. PLEASE PRINT.

PERSONAL		Date: _____
Name: _____		
Last	First	Middle
Current Address: _____		
Street	City	State Zip Code
Daytime Phone (____) _____ - _____ Evening Phone (____) _____ - _____ Mobile Phone (____) _____ - _____		
E-Mail Address: _____		

EMPLOYMENT DESIRED – Note: with regard to "Position Applied For", do not leave blank or indicate "open" or "any". Must specify exact position for which you are applying.	
Position Applied For: _____	Hourly Rate/Salary Desired: \$ _____
What kind of position are you seeking? _____ Full-time _____ Part-time _____ Temporary _____ Summer	
What days and hours are you available to work? _____	
Are you available to work overtime and weekends if necessary? _____ Yes _____ No	
Are you 18 years of age or older? _____ Yes _____ No	
If hired, can you furnish proof that you are legally permitted to work in the United States? _____ Yes _____ No	
If hired, on what date are you available to begin work? _____	
I applied at McInnis Brothers Construction as a result of: _____ Advertisement (Identify source: _____)	
_____ Employee referral (Name of employee: _____)	
_____ Staffing Agency referral (Identify agency: _____)	
_____ Other (_____)	
Do you have a valid driver's license? _____ Yes _____ No	
Have you ever worked for McInnis Brothers Construction _____ Yes _____ No	
If yes, list dates of employment, position held and supervisor/superintendent:	

GENERAL INFORMATION

1. Have you ever applied or interviewed for a job with this company in the past? Yes No

If yes, please give the application date, position applied for, and name of interviewer:

2. Do you have any relatives working for the Company at this time? Yes No

If yes, please list name(s) and relationship to you: _____

EDUCATION & TRAINING

Type of School	Name and Location of School	Degree/Area of Study	Number of Years Attended	Graduated? (Check One)
High School	Name			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City _____ State			
College or Trade School	Name			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City _____ State			
Graduate School	Name			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City _____ State			
Other	Name			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City _____ State			

List other job-related licenses, certifications, or training you have completed: _____

Have you ever been in the Armed Forces? Yes No

Are you a member of the National Guard? Yes No

What type of education, training and experience did you receive in the military? _____

State any additional information you feel may be helpful to us in considering your application:

EMPLOYMENT HISTORY

Are you currently employed? Yes No If yes, may we contact your employer? Yes No

Did you complete this application yourself? Yes No If not, who did? _____

Below, please describe all employment positions beginning with your most recent job held, dating back ten years. Please account for all periods of employment, including summer and temporary jobs. Attach additional sheets if necessary.

NOTE: Even if you have attached a resume, this section must be completed.

Dates: <i>Include Month & Year</i>	Name and Location of Employer	Job Title And Supervisor	List major job duties; skills used or learned; promotions	Salary or Wages	Reason for Leaving
From: _____ To: _____	Name _____ City _____ State _____ Zip _____ Phone () _____	Job Title: _____ Supervisor: _____		Starting: \$ _____ Final: \$ _____	
From: _____ To: _____	Name _____ City _____ State _____ Zip _____ Phone () _____	Job Title: _____ Supervisor: _____		Starting: \$ _____ Final: \$ _____	
From: _____ To: _____	Name _____ City _____ State _____ Zip _____ Phone () _____	Job Title: _____ Supervisor: _____		Starting: \$ _____ Final: \$ _____	
From: _____ To: _____	Name _____ City _____ State _____ Zip _____ Phone () _____	Job Title: _____ Supervisor: _____		Starting: \$ _____ Final: \$ _____	

Account for any time during the past 10 years that you were not employed or attending school. Please account for the nature of your activities during these periods.

Dates	Reason for Unemployment	Nature of Activities While Unemployed

PERSONAL REFERENCES

List three individuals who are not relatives or former supervisors, but have a knowledge of your work ethic, experience and ability.

Name	Occupation	Phone Number	Address, City, State	# of Years Acquainted
		()		
		()		
		()		

IMPORTANT: PLEASE READ CAREFULLY, INITIAL EACH PARAGRAPH AND SIGN BELOW:

_____ By my signature and initials, I promise that the information provided in this employment application (and accompanying resume, if any) is true and complete, and understand that any false information or significant omissions may disqualify me from further consideration of employment, and may be justification for my dismissal from employment, if discovered at a later date, regardless of the time lapsed before discovery.

_____ I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that all offers of employment are conditioned on the provision of satisfactory proof of my identity and legal authority to work in the U.S. Offers of employment are also conditioned on the Company's receipt of satisfactory responses to reference requests.

_____ In making this application for employment, it is understood and accepted that as part of the application and employment process, and/or during my employment with McInnis Brothers Construction, I may be asked to submit to testing for alcohol and drugs. By signing this application, I hereby agree to submit to such examinations and tests and release all persons and companies from any liability arising out of such examinations and tests.

_____ I understand that if my employment is terminated by the Company for dishonesty, breach of trust, or any criminal acts, the authorities may be notified and I may be criminally prosecuted. I also understand that, if hired, I may not hold other employment, nor engage in sales, investments or other activities that create a conflict of interest with my position with this Company.

_____ I understand that nothing contained in this employment application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, **my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice**, at the option of myself or the Company, and that no promises or representations contrary to the foregoing are binding on the Company unless made in writing and signed by me and the Company's duly authorized officer.

Applicant's Signature: _____ **Date:** _____

Thank you for your interest in employment with McInnis Brothers Construction.
Applications will remain active for 90 days.



McInnis Brothers Construction, Inc.

APPLICANT EEO DATA SHEET

The Federal Government requires the following information be collected in order for us to demonstrate compliance with Equal Employment Opportunity and Affirmative Action. This data sheet will be detached from your Application for Employment and will in no way be used to make employment decisions or for other employment purposes. Your cooperation is voluntary and will be appreciated.

PERSONAL DATA

Name: _____ Date of Application: _____

Address: _____

Date of Birth: _____ Phone Number: _____ Male _____ Female _____

Position Applied For/Department: _____

REFERRAL SOURCE

Where did you hear about the job opening: _____

ETHNIC GROUP

_____ White _____ Hispanic _____ American Indian or Alaskan Native

_____ Black _____ Asian/Pacific

VETERAN STATUS

Are you a veteran of any branch of the U.S. Armed Forces?

_____ Yes _____ No If Yes, Branch: _____