## **APPLICATION FOR EMPLOYMENT**

## FOX CONTRACTORS CORP.

All applicants are considered for employment without regard to race, color, national origin, religion, sex, age, marital or veteran status, or any medical or physical handicap that will not adversely affect the safe and satisfactory performance of one's job.

Position (s) applied for	
AddressStreet City State Zip Code Telephone () Mobile or Beeper ()	
Have you ever been employed by Fox Contractors Corp. before?	
Have you ever been employed by Fox Contractors Corp. before?	
If yes, give dates and positions From// To/	
Date available for work Desired rate of pay?	_ No
Type of employment desired Full Time Part Time Seasonal Temporary Educational Co	o-Op
Are you 18 years or older?YesNo If under 18, can you furnish a work permit?Yes	_No
Do you have relatives working for Fox Contractors?	_No
If yes give name and relationship	
Have you ever pled "guilty" or "no contest" to, or been convicted of a felony?	No
If yes, please provide date (s) and details	
Have you had any DUIs, OWIs, moving violations or at fault accidents in the last three years? Yes	Ne
If yes, please provide date (s) and details  Answering "yes" to these questions does not constitute an automatic bar to employment, factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.	
EMPLOYMENT HISTORY	
Provide the following information for your past three (3) employers, assignments or volunteer activities, starting with the most recent.	•
From To Telephone	
Position Address	
Responsibilities Pay	
May we contact? Yes No Reason for leaving	
FromToTelephone	
Position Address	
ResponsibilitiesPay	
May we contact? Yes No Reason for leaving	
From To Telephone	
Position Address	
ResponsibilitiesPay	
May we contact? Yes No Reason for leaving	

List last three (3) schools attended,	starting with the most recent		
School	No. Years Completed	Degree/Diploma	Major
References List names and telephones number of	of three business/work references who are not re	elated to you and are not previ	oue supervisors. If not
applicable, list three schools or person	onal references who are not related to you.	stated to you and are not previ	ous supervisors. If not
Name	Tel	lephone	Years Know
Applicant Statement			
	provided in order to apply for and secure work w	vith Fox Contractors Corp. is	true, complete and
I understand that any information pr cause to cancel further consideration discovered.	ovided by me that is found to be false, incomple a of this application, or immediately discharge n	ete or misrepresented in any r ne from the employer's service	espect, will be sufficiente, whenever it is
all references (personal and Professi verify the accuracy of all informatio claims I may have regarding the emp	ration, the employer, its representatives, employ onal), employers, public agencies, licensing aut in provided by me in this application, resume or ployer, its agents, employees or representatives, or persons, corporations or organizations for further than the complex of the	horities and educational insti- job interview. I hereby waiv for seeking, gathering and us	tutions and to otherwise e any and all rights and sing such information in
I understand that the employer does of limiting or excusing any applican	not unlawfully discriminate in employment and t from consideration for employment on a basis	no question on this applicati prohibited by applicable loca	on is used for the purposal, state, or federal law.
the same right to terminate my empl does not constitute an agreement or or representative of the employer is	free to resign at any time, with or without cause oyment at any time, with or without prior notice contract for employment for any specific period authorized to make any assurances to the contra- inguage are valid unless they are in writing and s	e, except as may be required be lor definite duration. I under any and that no implied, oral of	by law. This application stand that no supervisor r written agreements
I also understand that if I am hired, I federal immigration laws require me	will be required to provide proof of Identity are to complete an I-9 Form in this regard.	nd legal authority to work in t	he United States and the
DO NOT SIGN UNTIL	YOU HAVE READ THE ABOV	E APPLICATION	STATEMENT.
I certify that I have read, fully under	stand and accept all terms of the foregoing App	lication Statement.	
Signature of Applicant		Date	1 1