



Application for Employment

Clark Drew Construction
302 32nd Ave S
Brookings, SD 57006

Phone: 605-692-9063
Fax: 605-692-1418

It is our policy to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental handicap, or veteran status.

Name: Last _____ First _____ Middle _____ Date _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone #: _____ Social Security #: _____

Position Applied For: _____

How did you hear of this opening: _____

When can you start: _____ Desired Wage: _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? Y _____ N _____

Are you looking for full time employment? Y _____ N _____ If no, what hours are you available? _____

Have you ever been convicted of a felony? Y _____ N _____ If yes, please fully describe the circumstances: _____

Education: List location, year graduated and major
High School: _____

College: _____

College: _____

Other: _____

In addition to your work history, are there other skills, qualifications or experience we should consider?:

OVER

Employment History: (Start with most recent employer).

Company Name: _____ **Supervisor Name:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Date started: _____ **Starting Wage:** _____ **Starting Position:** _____ **Phone:** _____

Date ended: _____ **Ending Wage:** _____ **Ending Position:** _____

Responsibilities:

Reason For leaving: _____

Company Name: _____ **Supervisor Name:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Date started: _____ **Starting Wage:** _____ **Starting Position:** _____ **Phone:** _____

Date ended: _____ **Ending Wage:** _____ **Ending Position:** _____

Responsibilities:

Reason For leaving: _____

Company Name: _____ **Supervisor Name:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Date started: _____ **Starting Wage:** _____ **Starting Position:** _____ **Phone:** _____

Date ended: _____ **Ending Wage:** _____ **Ending Position:** _____

Responsibilities:

Reason For leaving: _____

Attach additional information if necessary.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history. I understand that employment at this company is "at will", which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment will continue on that basis. I understand that no supervisor, manager or executive of this company other than the president has the authority to alter the foregoing.

Signature: _____ **Date:** _____