



# Application For Employment

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department

**Applicant Information**

Name: \_\_\_\_\_  
Last Name
First Name
Middle Name
Suffix

Current Address: \_\_\_\_\_  
Street # and Name
City
State
Zip

Social Security #: \_\_\_\_\_ Telephone: \_\_\_\_\_  Home  Cell

Gender  Male  Female

Position(s) Applying For \_\_\_\_\_ Date of Application: \_\_\_\_\_

Salary Desired \_\_\_\_\_

you are offered a position of employment, when would you be available to start \_\_\_\_\_

**Referral Source:**  Employee  Relative  Advertisement  Government Employment Agency  
 Walk In  Private Employment Agency  Other

Name of Source: \_\_\_\_\_

Have you submitted an application to McCon Building & Petroleum Services, Inc. before: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____	Have you ever been employed by McCon Building & Petroleum Services, Inc. before: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____
--	--

Type of employment you desire:  Part Time  Full Time  Temporary  Seasonal

Are you able to perform the specific duties of this position <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain? _____	Are you able to meet the attendance requirements for this position? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain _____
---	---

Are you able to work overtime and weekends? <input type="checkbox"/> Yes <input type="checkbox"/> No	Can you travel? <input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain? _____	Are you a member of any professional or trade groups that are relevant to the position? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain _____
---	--

Have you been convicted of a crime in the past 7 years?  Yes  No  
 If yes, please explain: \_\_\_\_\_

*\* A conviction will not necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.*

Have you ever been bonded? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you over the age of 18? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

Is additional information, such as a different name or nickname necessary to verify job references?  Yes  No  
 Additional Information: \_\_\_\_\_

Do you have a valid Drivers License if applicable to your position:  Yes  No  
 Driver License # \_\_\_\_\_ State Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

**References**  
 List name and telephone number of three (3) business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name _____	Years Known _____	Telephone ( ) _____
_____	_____	( ) _____
_____	_____	( ) _____

**Educational Background**  
 ( A ) List last three (3) schools attended, starting with most recent. ( B ) List number of years completed. ( C ) Indicate degree or diploma earned if any ( D ) Grade Point Average or Class Rank ( E ) Major field of study ( F ) Minor field of study (if applicable)

( A ) School	( B ) Number of Years Completed	( C ) Degree Diploma	( D ) GPA Class Rank	( E ) Major	( F ) Minor



# Application For Employment

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical, disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis on any unlawful criteria.

Employment History			
Provide the following information for your past and current employers, assignments or voluntary activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.			
Employer	Telephone ( )	Dates Employed From To	Summarize the type of work performed and job
Address			
Job title		Hourly rates/Salary Starting	
Immediate Supervisor and Title		\$ Per	
Reason For Leaving		Hourly rates/Salary Final	
May we contact for Reference <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$ Per	
Employer	Telephone ( )	Dates Employed From To	Summarize the type of work performed and job
Address			
Job title		Hourly rates/Salary Starting	
Immediate Supervisor and Title		\$ Per	
Reason For Leaving		Hourly rates/Salary Final	
May we contact for Reference <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$ Per	
Employer	Telephone ( )	Dates Employed From To	Summarize the type of work performed and job
Address			
Job title		Hourly rates/Salary Starting	
Immediate Supervisor and Title		\$ Per	
Reason For Leaving		Hourly rates/Salary Final	
May we contact for Reference <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$ Per	
Employer	Telephone ( )	Dates Employed From To	Summarize the type of work performed and job
Address			
Job title		Hourly rates/Salary Starting	
Immediate Supervisor and Title		\$ Per	
Reason For Leaving		Hourly rates/Salary Final	
May we contact for Reference <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$ Per	
Comments: (Including any gaps in employment) _____			
<i>Applicant Skills: List any skills or Certifications that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability)</i>			
Skill _____	Years of Experience _____	Ability or Ranking	1 2 3 4 5
_____	_____		1 2 3 4 5
_____	_____		1 2 3 4 5

