



7 L. Construction LLC
 7 L Paving Inc
 553 Southwest Street
 Bellevue, Ohio 44811

Equal Opportunity Employers

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Date _____

Name _____
 First Middle Last

Present address _____
 Number Street City State Zip

Telephone (____) _____ e-mail _____

Social Security No: _____ Date of Birth _____

Driver's license number _____ State of issue _____ CDL _____

Are you a member of a union? _____
 If yes, name of union _____

EMPLOYMENT DESIRED

Position(s) applied for _____

Employment desired FULL-TIME ONLY PART-TIME ONLY

When are you available to start work?

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL & LOCATION	Years Attended	Did you Graduate	Subjects Studied
High School				
College				
Trade, Business Correspondence				

WORK EXPERIENCE

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer Address City, State, Zip Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Are you currently employed? Yes No

If not, how long since leaving last employment? _____

Have you ever been employed with this company? Yes No

If yes, when? _____

Do you have any friends or relatives employed by this company? Yes No

If yes, please provide their names and relationship to you.

REFERENCES

Please list below three persons not related to you who have knowledge of your work performance and/or personal qualifications within the last 5 years.

Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted
Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted
Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted

Physical History

Do you have any physical conditions which may limit your ability to perform the job applied for? _____

If yes, what can be done to accommodate your limitations?

Would you be willing to take a physical examination? _____

PLEASE READ AND SIGN

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give 7 L. Construction LLC and 7 L Paving Inc permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release 7 L. Construction LLC and 7 L Paving Inc from any liability as a result of such contact.

I also understand that (1) 7 L. Construction LLC and 7 L Paving Inc have a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on successful passing of testing under such policy.

I further understand that my employment with 7 L. Construction LLC and 7 L Paving Inc shall be probationary for a period of ninety (90) days. I understand, also, that I am required to abide by all rules and regulations of 7 L. Construction LLC and 7 L Paving Inc, as permitted by Law.

Signature_____

Date_____
