## D Armstrong Contracting LLC



### **Application for Employment**

**D.** Armstrong Contracting LLC (DAC) is an Equal Opportunity Educational Institution and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualification and without regard to race, sex, national or ethnic origin, disability, age, veteran status, or sexual orientation.

**PLEASE TYPE OR PRINT.** Complete the entire application to the best of your ability. You may attach a resume, but you must still complete all questions; or your application may be deemed incomplete and may not be considered. Please fill out each field (don't just write "See Resume"). Applications with missing or invalid job numbers will not be considered for any position.

		PE	RSONAL INF	ORMATION			
FULL NAME:					DATE:		
	First	Middle		Last			
ADDRESS:	Street Address	,			Apt/Su	ito	
	Street Address	•			Apt/30	ite	
	City	S	State		Zip Coo	de	
E-MAIL:				PHO	ONE:		
SOCIAL SECURI	TY NUMBER (S	SN):					
		er? □ YES □					
	?   MARRIED				D DOMESTIC P.		
	eligible to work ary Veteran?	k in the United Sta	tes?   YES	□ NO Are y	you a US Citizen?	☐ YES ☐ NO	
Are you Disable	•		If YES,	please indicate	e disability(s):		
Can you physic	ally perform th	e daily requiremen	nts for manua	l labor? 🗆 YE	S □ NO		
If NO, please ex	xplain:						
		u have a valid Drive					
Emergency Cor	ntact:	l	Phone: (		Relati	on:	
			POSITI	ON			
POSITION APPI	LYING FOR:			DATE AVAIL	ABLE TO START: _		
DESIRED PAY:	\$	_ 🗆 HOUR 🗆 SALAI	RY <b>EMPL</b>	OYMENT DESIR	RED:    FULL-TIME	□ PART-TIME	□ТЕМР
			EDUCA <sup>-</sup>	TION			
NAME of SCHO		LOCATION	YEARS	ATTENDED	DEGREE RCVD	MAJO	R
High School/GED	):						
Other School:							
College:							
College:							

# PAMSTROAD OF CONTROL

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Please list any other credentials /licenses/ professional affiliations, etc., applicable to the position being applied for:

**SKILLS**: Please list any technical, clerical, trade, or otherwise related skills relevant to this position. Include applicable computer systems and/or software of which you have working knowledge, and note your level of proficiency (basic, intermediate, or expert).

#### **WORK EXPERIENCE**

Please detail your entire work history beginning with your <u>current</u> or most recent employer. If you held more than one position within the same organization, detail each position separately (attach additional sheets if necessary). Omission of prior employment may be considered falsification of information. Please be prepared to explain any gaps in employment. Include full-time military or volunteer commitments. **DAC and/or it's affiliates reserve the right to contact all current and former employers for reference information.** 

DATE MM/YYYY	NAME ADDRESS OF EMPLOYER	SALARY	POSITION / DUITIES	REASON FOR LEAVING
From:		\$		
To:		Per:		
Supervisors Name/Ti	tle:	Phone Numb	er:	
From:		\$		
То:		Per:		
Supervisors Name/Ti	tle:	Phone Numb	er:	
From:		\$		
То:		Per:		
Supervisors Name/Ti	tle:	Phone Numb	er:	
From:		\$		
То:		Per:		
Supervisors Name/Ti	tle:	Phone Numb	er:	
		•		

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation, or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment, if discovered at a later date. I authorize DAC to investigate, without liability all statements contained in this application and supporting materials. I authorize references and former employers, without liability to make full response to any inquiries in connection with this application for reemployment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that the staff employees of DAC serve at-will, and the employment relationship may be terminated at any time by either party for any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a state security questionnaire and state loyalty oath, and to comply with company and departmental regulations. I understand that DAC does NOT offer benefits. I understand that the first SIX (6) months of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion, and during which I may be terminated without right of appeal.

APPLICANT SIGNATURE: DATE:
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