



CHAPMAN
BROS., INC.
 GENERAL CONTRACTING & SITEWORK
 EMPLOYMENT APPLICATION

An Equal Opportunity Employer

APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		Alternate Phone			
Date Available				Desired Wage	
Position Applied for					
If hired, can you provide verification of your right to work in the United States?	YES	NO	Proof of identity and eligibility will be required upon employment		
Have you ever worked for this company?	YES	NO	If so, when?		
Do you have any relatives or friends who work for the Company?	YES	NO	If so, who?		
Do you have reliable transportation?	YES	NO	Are you over the age of 18 years?	YES	NO
Can you perform the essential functions of the position for which you are applying?	YES	NO	If not, please explain:		
NOTE: If you have questions as to what functions are applicable to the position for which you are Applying, please ask the interviewer before you answer this question.					
Have you ever been convicted of a felony or a misdemeanor which resulted in imprisonment within the last seven years?	YES	NO	If yes, please explain:	Date:	
NOTE: A conviction will not necessarily result in denial of employment.					
Veteran of the U.S. Military Service?	YES	NO	If so, branch?		

DAYS AND HOURS AVAILABLE (If employed, I understand that I am required to work the schedule mandated by the company.)							
DAY	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From:							
To:							

EDUCATION				
	Name and Location of School	Course of Study	Number of Years Completed	Diploma or Degree Received
High School				
College				
Vocational or Trade School				
Graduate Work				

JOB SPECIFIC SKILLS
List skills or training you have received that relate to the job you are applying for.

PROFESSIONAL EXPERIENCE (Start with your present or most recent position. Use an additional sheet of paper If more space is needed).			
1. May we contact this employer?		YES	NO
Employer		Telephone	
Full Address		Supervisor	
Dates Employed	From:	To:	
Rate of Pay	Beginning:	Ending:	
Title		Reason for Leaving	
Describe the work performed:			
2. May we contact this employer?		YES	NO
Employer			
Full Address		Supervisor	
Dates Employed	From:	To:	
Rate of Pay	Beginning:	Ending:	
Title		Reason for Leaving	
Describe the work performed:			
3. May we contact this employer?		YES	NO
Employer			
Full Address		Supervisor	
Dates Employed	From:	To:	
Rate of Pay	Beginning:	Ending:	
Title		Reason for Leaving	
Describe the work performed:			
PERSONAL REFERENCES (Give at least two references – not relatives – with whom you have known for more than three years).			
Name	Address	Telephone	Occupation
Name	Address	Telephone	Occupation

Applicants will receive consideration for positions, without regard to race, color, religion, age, sex, except where sex is a bona fide occupational qualification, sexual orientation, marital status, individuals with disabilities, and equally to disabled veterans and veterans of the Vietnam era. **IMPORTANT, PLEASE READ AND SIGN:** I understand that failure to reveal any prior employer, or giving false or misleading information by me on any part of this Application for Employment can be grounds for termination from the company or its' subsidiaries. I understand that if I am hired, my employment is for no definite time and may be terminated at any time without prior notice.

Signed: _____

Date: _____

RESULTS: (FOR OFFICE USE ONLY) Hired? YES NO

Date Beginning Employment

_____/_____/_____

Interviewed By: _____

If Yes, Job Title and Department: _____

Compensation: \$ _____ per _____

Date: ____/____/_____