## **Unique Concrete**

## **Employment Application**

			Арр	licant I	nforma	ation				
Full Name:					Date:					
	Last		Firs	t			М.І.			
Address:										
	Street Address								Apartment/Unit #	
	City						State		ZIP Code	
Phone:					Email					
Date Availal	ble:	Social	Securit	y No.:			Desi	red Salary	y: <b>\$</b>	
Position Applied for:										
Are you a citizen of the United States?				YES NO If no, are you authorized to work in the U.S.? $\Box$						
Have you ever worked for this company? $\begin{tabular}{c} YES \\ \Box \end{tabular}$				If yes, v	when?					
YES NO Have you ever been convicted of a felony?										
lf yes, expla	in:									
					ation					
High School	l:			Address:						
From:	То:	Di	d you g	raduate?	YES	NO □	Diploma:			
College:				Address:						
From:	То:	Di	d you g	raduate?	YES	NO	Degree:			
Other:				Address:						
From:	То:	Di	d you g	raduate?	YES	NO □	Degree:			
References										
Please list three professional references.										
Full Name:							Relat	ionship:		
Company:								Phone:		
Address:										

Full Name:				Relationship:
Company:				Phone:
Address:				
Full Name:				Relationship:
Company:				Phone:
Address:				
	Previous E	mployme	ent	
Company:				Phone:
Address:				Supervisor:
Job Title:	Starting S	Salary: <b>\$</b>		Ending Salary: <b>\$</b>
Responsibili	ties:			
From:	То:	Reason fo	or Leaving:	
•	tact your previous supervisor for a reference?	YES	NO □	
Company:				Phone:
Address:				Supervisor:
Job Title:	Starting S	Salary: <u>\$</u>		Ending Salary: <b>\$</b>
Responsibili	ties:			
From:	То:	Reason fo	or Leaving:	
May we cont	tact your previous supervisor for a reference?	YES		
Company: Address:				Phone:
Address.				Supervisor:
Job Title:	Starting Salary: <u>\$</u>			Ending Salary: <u>\$</u>
Responsibili	ties:			
From:	То:	Reason fo	or Leaving:	
May we cont	tact your previous supervisor for a reference?	YES		

Military Service				
Branch:	From: To:			
Rank at Discharge:	Type of Discharge:			
If other than honorable, explain:				
	Disclaimer and Signature			
I certify that my answers are true and comp	plete to the best of my knowledge.			
If this application leads to employment, I un interview may result in my release.	nderstand that false or misleading information in my application o	or		
Signature:	Date:			

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## **Employee Information Sheet**

LAST NAME				
FIRST NAME	MIDDLE INITIAL			
ADDRESS				
CITY	STATE ZIP			
SOCIAL SECURITY #				
DEPT W	/ITHHOLDING STATUS M or S			
NUMBER OF EXEMPTI	ONS DATE OF BIRTH			
GENDER	DATE OF HIRE			
SALARY AMOUNT	OR HOURLY RATE OF PAY			
SPECIAL DEDUCTIONS (WAGE ATTACHMENTS, ETC.) PLEASE PROVIDE DESCRIPTION, AMOUNT OF DEDUCTION AND ANY GOALS APPLICABLE				

FOR W-2 PURPOSES, I WILL NEED EARNINGS FOR THIS YEAR (GROSS TO NET) IF APPLICABLE. PLEASE ATTACH EARNINGS STATEMENTS FOR CURRENT YEAR IF ANY.