



AN EQUAL OPPORTUNITY EMPLOYER

APPLICATION FOR EMPLOYMENT

Position Desired: _____ Part time Full time Date: _____

Name: _____
 (Print) Last First Middle

Present Address: _____ How long have you lived here? _____
 Street and Number City State Years Months

Previous Address: _____ How long did you live there? _____
 Street and Number City State Years Months

Home Telephone Number: _____ Cellular Telephone Number: _____

Email address: _____ Date available: _____

Have you been employed by Cragin & Pike, Inc. before? Yes No

If yes, please give dates and position: _____

Do you know any Cragin & Pike employees? If yes, please give name(s): _____

How did you learn about this position? _____

EMPLOYMENT HISTORY

Provide your employment history for the last 10 years minimum, beginning with your most recent experience. Include U.S. Military Service, volunteer positions and any period of unemployment. If self-employed, include firm's name and business references. You are encouraged to attach a resume, but a resume cannot be substituted for completing this section. Incomplete information may disqualify you from consideration. (Add additional pages if necessary.)

Present or Last Employer _____ Address _____ City, State, Zip Code _____ Telephone	Employed From (mo./yr.) _____ To (mo./yr.)	Pay Start \$ _____ Final \$	Your Title or Position _____ Name and Title of Last Supervisor	Reason for Leaving _____
Present or Last Employer _____ Address _____ City, State, Zip Code _____ Telephone	Employed From (mo./yr.) _____ To (mo./yr.)	Pay Start \$ _____ Final \$	Your Title or Position _____ Name and Title of Last Supervisor	Reason for Leaving _____
Present or Last Employer _____ Address _____ City, State, Zip Code _____ Telephone	Employed From (mo./yr.) _____ To (mo./yr.)	Pay Start \$ _____ Final \$	Your Title or Position _____ Name and Title of Last Supervisor	Reason for Leaving _____

Present or Last Employer <hr/> Address <hr/> City, State, Zip Code <hr/> Telephone	Employed From (mo./yr.) <hr/> To (mo./yr.)	Pay Start \$ <hr/> Final \$	Your Title or Position <hr/> Name and Title of Last Supervisor	Reason for Leaving
Present or Last Employer <hr/> Address <hr/> City, State, Zip Code <hr/> Telephone	Employed From (mo./yr.) <hr/> To (mo./yr.)	Pay Start \$ <hr/> Final \$	Your Title or Position <hr/> Name and Title of Last Supervisor	Reason for Leaving

May we contact your current employer? Yes No If no, please explain: _____

For the purposes of verifying your work and education record, please provide any other name you have used:

Are you legally eligible for employment in the United States? Yes No
(If offered employment, you will be required to provide documentation to verify eligibility.)

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.) Yes No

Are you capable of performing the essential job duties required of the position for which you are applying with or without reasonable accommodation? Yes No

Have you ever been terminated or asked to resign from any job? Yes No If yes, please explain circumstances: _____

Have you ever been convicted of a misdemeanor or felony? Yes No
If yes, please give the date(s) and details (do not include minor traffic citations and arrest or convictions which have been sealed or expunged):

NOTE: Answering "yes" to these questions does not necessarily preclude employment. Each case is considered individually including factors such as your age and when the offense occurred, seriousness and nature of the violation, and rehabilitation. Omission of requested information is basis for rejecting an application.

Please indicate any professional experience, special training, licensing and/or certifications that you have which are relevant to the position for which you are applying.

EDUCATION

School Name	Years Completed (Circle)	Diploma/Degree	Describe Course of Study or Major	Specialized Training, Experience, Skills and Extra-Curricular Activities
High School:	9 10 11 12			
College/University:	1 2 3 4			
Graduate/Professional:	1 2 3 4			
Trade/Correspondence:				
Other:				

PERSONAL REFERENCES

Please list persons who know you well—**not** previous employers or relatives.

Name	Company / Position	Address and/or Email (Street, City, State)	Telephone Number	# of Years Known

APPLICANT’S STATEMENT & AGREEMENT

Please read carefully and sign below. This application will be considered active for a maximum of sixty (60) days. If you wish to be considered for employment after that, you may be required to reapply. Cragin & Pike participates in E-Verify and will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee to confirm work authorization.

Cragin & Pike provides equal employment opportunities to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, disability, or genetics. In addition to federal law requirements, Cragin & Pike complies with applicable state and local laws governing nondiscrimination.

By signing below, I certify that the statements made by me on this application are true, complete and accurate. If employed, I understand that any misrepresentation or material omission of fact on this or any other document required by Cragin & Pike may be considered grounds for disqualification or dismissal.

I understand that Cragin & Pike may contact my previous employers and I authorize those employers to disclose to Cragin & Pike all records and information pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees and representatives, as well as other individuals who release information to Cragin & Pike, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me. I authorize the persons named herein as personal references to provide Cragin & Pike with any pertinent information they may have regarding my character.

I understand that bonding may be a condition of hire. If it is, I will be so advised either before or after hiring and a bond application will need to be completed.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Cragin & Pike to hire me. If I am hired, I understand that either Cragin & Pike or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Cragin & Pike has the authority to make any assurance to the contrary.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules, and regulations of employment with Cragin & Pike. I acknowledge that I will comply with Cragin & Pike’s drug-free workplace policy that prohibits illegal drug and alcohol abuse by employees. Cragin & Pike reserves the right to require drug and/or alcohol testing as a condition of employment, when reasonable suspicion exists, when an accident or safety violation occurs, and/or if an employee is found in possession of alcohol or any illegal or non-prescribed controlled substance in violation of our policy.

Applicant name (printed): _____ **Date:** _____

Applicant signature: _____