



Employment Application

Lancaster Burns Construction, Inc. is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability, veteran status or any other protected classes as defined by the Equal Opportunity Commission.

General Information

Position Applying for:	Date:
Please circle one: _____ Full Time (40 hrs.) or _____ Part Time (<40 hrs.)	Date Available:
Applicant Name: First, Middle, Last	Phone:
Address:	E-Mail:
City, State Zip code:	

How were you referred?

Are any of your relatives currently employed with the company or its divisions? Yes No

If yes, name of relative & relationship: _____

Are any of your friends currently employed with the company or its divisions? Yes No

If yes, name of friend: _____

****Failing to list all relatives or friends will result in immediate disqualification of employment****

Are you legally eligible to be employed in the United States? Yes No

(Proof of eligibility will be required upon employment).

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes No

Employment History

Please complete this section in its entirety.

May we contact your present employer? _____ Yes _____ No _____ N/A

If any employment was under a different name, please indicate: _____

Name of present or most recent Employer:	Type of Business:	Address:
Supervisor's Name:	Phone Number:	City, State Zip code:
Job Title:	Department:	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates of Employment:	Please give us any other names you were employed under?	

Work Performed:		Reason for Leaving:
Name of previous Employer:	Type of Business:	Address:
Supervisor's Name:	Phone Number:	City, State Zip code:
Job Title:	Department:	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates of Employment:	Please give us any other names you were employed under?	
Work Performed:		Reason for Leaving:
Name of previous Employer:	Type of Business:	Address:
Supervisor's Name:	Phone Number:	City, State Zip code:
Job Title:	Department:	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates of Employment:	Please give us any other names you were employed under?	
Work Performed:		Reason for Leaving:
Name of previous Employer:	Type of Business:	Address:
Supervisor's Name:	Phone Number:	City, State Zip code:
Job Title:	Department:	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates of Employment:	Please give us any other names you were employed under?	
Work Performed:		Reason for Leaving:

Education/Training

Please complete in its entirety.

College or Institution	Degrees	Special Training or Licenses related to position

Professional Licenses or Memberships

Type of License: _____ License #: _____ Issued By: _____

Type of License: _____ License #: _____ Issued By: _____

Type of License: _____ License #: _____ Issued By: _____

Please explain any gaps in employment:

Have you ever been discharged or asked to resign from a job? Yes or No

If yes, please explain: _____

Applicant's Certification and Agreement

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and I authorize Lancaster Burns Construction, Inc. and/or any of its representatives to verify their accuracy and to obtain reference information on my work performance. I hereby release Lancaster Burns Construction, Inc. and/or any of its representatives from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. The passage of a clean Background check is required.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that any employment relationship with this company is of an at-will nature, which means my employment may be terminated at any time, with or without cause, by the Employer or by myself. I also understand that, if hired, I agree to adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Applicant's Signature

Date

Applicant's Printed Name

Date Received

Voluntary Self Identification

Completion of this data is voluntary and will not affect your opportunity for employment, or terms or conditions of employment. This form will be used for EEO-1 reporting purposes only and will be kept separate from all other personnel records only accessed by the Human Resources department. Please return completed forms to the HR department.

GENDER:

(Please check one of the options):

Male Female

RACE/ETHNICITY:

(Please check one of the descriptions below corresponding to the ethnic group with which you identify.)

Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Black or African American (Not Hispanic or Latino): A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.

Asian (Not Hispanic or Latino): A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino): A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.

Two or more races (Not Hispanic or Latino): All persons who identify with more than one of the above five races.