

MIDWEST CONTRACTORS, INC.

112 S. Kansas Ave., Suite 301 ~ PO Box 243 ~ Norton, KS 67654
(785) 877-3565 ~ fax (785) 877-2014 ~ *mwc@ruraltel.net*

EMPLOYMENT APPLICATION

Applications are considered without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

PERSONAL INFORMATION

Name: _____

Street Address: _____ City, State, Zip: _____

Phone: _____ SSN: _____

Date _____ Start Date _____

Full-time Part-time Temporary Summer help

Referral Source _____

Have you ever been convicted or charged with a felony or misdemeanor? Yes No

If yes, please explain details in full, including dates, details of offence(s) charged, jurisdiction and disposition of case: _____

EDUCATION

Schools/Colleges Attended:	# Years	Year Grad	Degree
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_____	_____	_____	_____
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_____	_____	_____	_____
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EMPLOYMENT/WORK EXPERIENCE

Start with your present or most recent position. Include military service assignments and volunteer activities.

Employer: _____ Job Title _____

Street Address: _____ City, State, Zip _____

Duties, Responsibilities, Accomplishments: _____

Reason for leaving: _____

Dates of Employment (Month/Year): From _____ to _____

Employer: _____ Job Title _____

Street Address: _____ City, State, Zip _____

Duties, Responsibilities, Accomplishments: _____

Reason for leaving: _____

Dates of Employment (Month/Year): From _____ to _____

Employer: _____ Job Title _____
Street Address: _____ City, State, Zip _____
Duties, Responsibilities, Accomplishments: _____

Reason for leaving: _____
Dates of Employment (Month/Year): From _____ to _____

REFERENCES

Include only individuals familiar with your work ability. Do not include relatives.

Name: _____ Company: _____
Position: _____ Phone: _____
Street Address: _____ City, State, Zip: _____

Name: _____ Company: _____
Position: _____ Phone: _____
Street Address: _____ City, State, Zip: _____

Name: _____ Company: _____
Position: _____ Phone: _____
Street Address: _____ City, State, Zip: _____

SPECIAL SKILLS

Describe any special skills or qualifications for this work: _____

Do you have a valid driver's license: Yes No If yes, State of Issue: _____
DL#: _____ CDL? Yes No
Restrictions: _____

HEALTH AND SAFETY

Do you have any physical or mental conditions which may affect your job performance or safety? Yes No
Do you regularly take any prescription medicine or drugs which may affect your job performance or safety? Yes No

CERTIFICATION AND RELEASE: I certify that I have read and understand the applicant note on page 1 of this form and that the Answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions, or misrepresentations of facts called for in this application may result in rejection of my application or discharge at any time during employment. I authorize Midwest Contractors, Inc., or its agents, including consumer reporting bureaus, to verify any of this information including, but not limited to, criminal history and motor vehicle driving records. I authorize all persons, schools, companies and law enforcement authorities to release any information concerning my background and hereby release any said persons, schools, companies, and law enforcement authorities from any liability for any damage whatsoever for issuing this information. I also understand that the use of illegal drugs is prohibited during employment. If company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to and during employment.

SIGNATURE: _____ **DATE:** _____