Employment Application Form

PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

Fax Completed Form To Hanley Construction (209) 462-4120

PLEASE COMPLETE PAGES 1-4.		DATE				
Name						
	Last	First	Middle		Maiden	
Present address						
	Number	Street	City State			
How long		S	ocial Security No.			
Telephone (<u>)</u>						
If under 18, please list	age					
)		No Pref Mon Tue	railable to work Thur Fri Sat Sun		
How many hours can y	you work weekly?		Can you work	nights?		
	FULL TIME ONLY					
Employment desired	FULL-TIME ONLY	PART-TIM	E ONLY	FULL- OR PART-	-TIME	
	FULL-TIME ONLY	PART-TIM	E ONLY	FULL- OR PART-	-TIME	
		PART-IIM	E ONLY	FULL- OR PART-	-TIME	
		PARI-IIM	E ONLY	FULL- OR PART-	-TIME	
		LOCATION (Complete mailin address)	NUMBEI	R OF YEARS	MAJOR & DEGREE	
When available for wo	rk?	LOCATION (Complete mailin	NUMBEI	R OF YEARS	MAJOR &	
When available for wo TYPE OF SCHOOL High School	rk?	LOCATION (Complete mailin	NUMBEI	R OF YEARS	MAJOR &	
When available for wo TYPE OF SCHOOL High School College	rk?	LOCATION (Complete mailin	NUMBEI	R OF YEARS	MAJOR &	
When available for wo	rk?	LOCATION (Complete mailin	NUMBEI	R OF YEARS	MAJOR &	
When available for wo TYPE OF SCHOOL High School College	rk?	LOCATION (Complete mailin	NUMBEI	R OF YEARS	MAJOR &	
When available for wo TYPE OF SCHOOL High School College Bus. or Trade School	rk?	LOCATION (Complete mailin	NUMBEI	R OF YEARS	MAJOR &	
When available for wo TYPE OF SCHOOL High School College Bus. or Trade School Professional School	NAME OF SCHOOL	LOCATION (Complete mailin address)	g COM	R OF YEARS IPLETED	MAJOR &	
When available for wo TYPE OF SCHOOL High School College Bus. or Trade School Professional School HAVE YOU EVER BE If yes, explain number	rk?	LOCATION (Complete mailin address) RIME? No foffense(s) leading to	g NUMBEI	R OF YEARS IPLETED	MAJOR & DEGREE	
When available for wo TYPE OF SCHOOL High School College Bus. or Trade School Professional School HAVE YOU EVER BE If yes, explain number	NAME OF SCHOOL EN CONVICTED OF A CR of conviction(s), nature of	LOCATION (Complete mailin address) RIME? No foffense(s) leading to	g NUMBEI	R OF YEARS IPLETED	MAJOR & DEGREE	

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DO YOU HAVE A DRIVER'S LICENSE? Yes	No		
What is your means of transportation to work?			
Driver's license number State of Expiration date	of issue		_ Operator Commercial (CDL) Chauffeur
Have you had any accidents during the past three ye Have you had any moving violations during the past t		s?	How many? How Many?
	OFFIC	E ONLY	
Yes TypingNoWPM PersonalYesPC	10-key		Word Yes Processing No WPM
Computer No Mac		Skills	
Please list two references other than relatives or prev	vious empl		
Name		Name	
Position		Position _	
Company		Company	
Address		Address _	
Telephone ()		Telephone	()
An application form sometimes makes it difficult for a space below to summarize any additional information which you are applying.			

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	MILI	TARY			
HAVE YOU EVE	R BEEN IN THE ARMED FORCES?	Yes No			
ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes No					
Specialty	Date Er			e	
Work Experience	Please list your work experience for the past If you were self-employed, give firm name. A			job held.	
Name of employ Address		Name of last supervisor	Employment dates	Pay or salary	
City, State, Zip C Phone number	Code		From	Start	
			То	Final	
		Your last job title			
Reason for leavi	ng (be specific)				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.					
Name of employ Address	er	Name of last supervisor	Employment dates	Pay or salary	
City, State, Zip C Phone number	Code		From	Start	
T HORE HUMBER			То	Final	
		Your Last Job Title			
Reason for leaving (be specific)					
List the jobs you company.	held, duties performed, skills used or learned,	advancements or pro	omotions while you wo	rked at this	

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Work experience	Please list your work experience for the lf you were self-employed, give firm na			job held.	
Name of employer Address		Name of last supervisor	Employment dates	Pay or salary	
City, State, Zip Code Phone number	Code		From	Start	
Thoric namber			То	Final	
		Your last job title			
Reason for leav	ring (be specific)				
company.					
Name of employ	yer	Name of last	Employment dates	Pay or salary	
City, State, Zip	Code	supervisor	From	Start	
Phone number			To	Final	
		Your last job title	1.0	- mai	
Reason for leav	ring (be specific)				
List the jobs you company.	u held, duties performed, skills used or le	earned, advancements or pr	omotions while you wo	rked at this	
•	your present employer?Yes _				
	te this application yourself Yes _	No			
If not, who did?					