



EMPLOYMENT APPLICATION

We are an equal opportunity employer

All applicants will be considered for **employment** without attention to race, color, religion, sex, sexual orientation, gender identity, national origin, veteran or disability status.

Position Applied For: _____

Personal Information

Last Name	First	Middle	Date
Street Address			Home Telephone
City, State, Zip			
E-mail Address			Cell Telephone
Have you ever applied for a position with us? Yes No			Date available to start?
Type of employment desired? Full Time Part Time Temporary			Hourly pay Desired
How did you hear about AMG Demolition?: Internet Ad Employee/Relative Walk-in Other:	Are you at least 18 yrs of age? Yes No		
If someone referred you, please list their name:			
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? If NOT, please describe the functions that cannot be performed:			

Education

<i>School</i>	<i>Name & Location</i>	<i>Course of Study</i>	<i>Years Completed</i>	<i>Did you Graduate? (Year)</i>	<i>Degree or Diploma</i>
Business/Trade/Tech.					
High School					
College					

Certificates: List any certificates that you currently possess

<i>Certificates</i>	<i>Is this current? (Yes or No)</i>	<i>Expiration date</i>
Asbestos/physical		
40 hr. Hazwoper		
OSHA 30/40?		
Boom/scissor lift/forklift		
Lead		
Other:		

Do you have experience driving heavy machinery?

Ex: bulldozer, bobcat, etc.

<i>Heavy Equipment you can operate</i>	<i>Years of driving experience</i>	<i>Are you currently certified?</i>

Job related questions

How many years of construction experience do you have?
How many years of demolition experience do you have?
Are you able to lift up-to 50 lbs.?
Please list any languages that you speak:
Do you have reliable transportation to and from the job?

Employment History (*most recent first*)

List all present and past employment history starting with your most recent employer.
Account for all periods of unemployment. You must complete this section even if attaching a resume.

Company Name	Telephone
Address	Employed - (month and year) From: To:
Name of Supervisor	
State Job and Describe Your Duties	Reason for Leaving

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Address	Employed - (month and year) From: To:
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References

List three (3) references who are not related to you and have knowledge of your work performance within the last three (3) years.			
Name	Occupation	Phone #	Years Known

Signature

I certify that the answers given herein are true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand and agree that, if employed, I would be required to abide by all present and subsequent issued rules and regulations of the Company.

I authorize AMG Demolition to make such investigations and inquiries of my personal employment, education and other related matters as may be necessary in arriving at an employment decision. I hereby indemnify AMG Demolition and its officers, employees and agents against any liability which might result from making such investigations or inquiries. I hereby release employers, schools or other persons or entities from all liability in responding to inquiries in connection with my application.

I understand that this application is not intended to be a contract of employment. In the event of employment, I agree to execute certain agreements relating to, but not limited to, employment and confidentiality. I understand and agree that, if I am offered a position, it will be offered on condition that my employment shall be at will and for no definite period, and that my employment may be terminated, at any time, with or without cause and with or without prior notice.

I fully understand the conditions mentioned above for employment with AMG Demolition. This application becomes inactive after six (6) months. At the conclusion of this time period, if I have not heard from the Employer and still wish to be considered for employment, it will be necessary to complete a new application.

Signature _____ Date _____