

Lipham Construction Co., Inc.
400 N Broadway · P.O. Box J · Aspermont, TX · 79502
Phone: (940) 989-3503 · Fax: (940) 989-2780

Application for Employment

Lipham Construction Co., Inc. is committed to the principle of equal opportunity in employment. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

GENERAL INFORMATION

Date _____

Position(s) Applied For _____

Employment Desired

Full-Time Part-Time Seasonal

Referral Source

Newspaper Friend Walk-In
 Employment Agency Relative Other _____

Name

_____ Last First Middle

Address

_____ Number Street City State Zip

Telephone Number () _____

Social Security Number _____

If under 18, can you provide a work permit?

Yes No

Have you ever filed an application with us before?

Yes No
If Yes, give date _____

Have you ever been employed with us before?

Yes No
If Yes, give date _____

If Yes, give reason for leaving _____

Are you currently employed?

Yes No

If Yes, may we contact your employer?

Yes No

Are you a United States citizen?

Yes No

If No, do you have a valid work permit?

Yes No

Are you on a lay-off and subject to recall?

Yes No

Can you travel if a job requires it?

Yes No

Have you been convicted of a felony within the last 7 years?

Yes No

If Yes, please explain _____

DRIVER'S LICENSE

Do you have a driver's license? Yes No

Driver's license number _____ State of issue _____ Expiration date _____

Have you had any accidents during the past three years? Yes No
 How many? _____

Have you had any moving violations during the past three years? Yes No
 How many? _____

MILITARY

Are you a veteran of the United States military service? Yes No
 If Yes, what branch? _____

If Yes, date entered _____ Date discharged _____

If Yes, please describe any special skills or training acquired while in the service: _____

EDUCATION

School	Name and location of school	Course of study	Did you graduate	Degree or diploma
High				
College				
Trade School				
Other				

WORK EXPERIENCE

Please list your work experience beginning with your most recent job.

Company Name	Telephone
Address	Duration of Employment
Name of Supervisor	Hourly Rate
Start Job Title/Description of Work Performed	Reason for Leaving

Company Name	Telephone
Address	Duration of Employment
Name of Supervisor	Hourly Rate
Start Job Title/Description of Work Performed	Reason for Leaving

Company Name	Telephone
Address	Duration of Employment
Name of Supervisor	Hourly Rate
Start Job Title/Description of Work Performed	Reason for Leaving

Company Name	Telephone
Address	Duration of Employment
Name of Supervisor	Hourly Rate
Start Job Title/Description of Work Performed	Reason for Leaving

May we contact any of the employers listed above? Yes No

OTHER SPECIAL SKILLS

Please list other special skills you may have, e.g., fluency in other languages, licenses, special training required for the position for which you are applying.

REFERENCES

Please list two references other than relatives or previous employers.

Name	Name
Position	Position
Company	Company
Address	Address
Telephone	Telephone

The information provided in the Application for Employment is true, correct and complete.

Signature _____

Date _____

Applicant EEO Data Form

The information requested is being collected for the purpose of reporting to Federal and Equal Employment Opportunity Agencies and will not be considered as part of the application for employment. It will be separated from the application.

Position(s) Applied For _____

Referral Source Newspaper Friend Walk-In
 Employment Agency Relative Other _____

Name _____

Last First Middle

Address _____

Number Street City State Zip

Telephone Number () _____ Date of Birth _____

Sex Male Female
Ethnic Origin White Black Hispanic Asian/Pac. Islander Am. Ind/Alaskan Other
Veteran Yes No

Spouse of Veteran Yes No
Former Texas Foster Youth 25 yrs of age or younger Yes No