

## **Employment Application**

APPLICANT INFORMATION							
Last Name				M.I.	. Date		
Street Address				Apartment,	Apartment/Unit #		
City				ZIP	ZIP		
Phon		E-mail	Address				
Date Available	Social Secu	ırity No.		Desired Salary			
Phone Phone P	osition Applied	d For					
Are you a citizen of the United States?	YES N	NO	If no, are you authorized	to work in the U.	S.? YES NO		
Have you ever worked for this company?	YES N	NO	If so, when?				
Have you ever been convicted of a felony?	YES N	NO	If yes,				

EDUCATION					
High School		Address			
From	То	Did you graduate?	YES	NO	Degree
College			Address		
From	То	Did you graduate?	YES	NO	Degree
Other			Address		
From	То	Did you graduate?	YES	NO	Degree

REFERENCES	
Please list three professional references.	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	

PREVIOUS EM	PLOYMENT							
Company			Phone (		)			
Address				Supervisor				
Job Title	ob Title Starting Salary			\$		Ending Salary \$		
Responsibilities								
From	То	Reason for Leaving	Reason for Leaving					
May we contact your previous supervisor for a reference? YES			NO					
Company				Phone (		)		
Address				Supervisor				
Job Title			Starting Salary	\$		Ending Salary \$		
Responsibilities								
From	То	Reason for Leaving	l					
May we contact yo	May we contact your previous supervisor for a reference? YES			NO				
Company				Phone (	Phone ( )			
Address	Address				Supervisor			
Job Title Starting Salary			\$ Ending Salary		Ending Salary \$			
Responsibilities								
From	То	Reason for Leaving	l					
May we contact yo	our previous superv	visor for a reference?	YES	NO				
MILITARY SEF	RVICE							
Branch					Fron	1 То		
Rank at Discharge				Type of Discharge				
If other than hono	orable, explain							
DISCLAIMER AND SIGNATURE								
I certify that my answers are true and complete to the best of my knowledge.								
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.								
I understand that any job offer is contingent upon successfully passing a pre-employment drug test.								
Signature						Date		

Authorization Form
I authorize TRIPTYCH Construction LLC to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment related information about me to TRIPTYCH Construction LLC and will hold TRIPTYCH Construction LLC and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information. I authorize TRIPTYCH Construction LLC to obtain any credit and consumer check.
I understand that nothing in this employment application, the granting of an interview or my subsequent employment with TRIPTYCH Construction LLC is intended to create an employment contract between myself and TRIPTYCH Construction LLC under which my employment could be terminated only for cause. On the contrary I understand and agree that, if hired my employment will be terminable at will and may be terminated by me or TRIPTYCH Construction LLC at any time and for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.
If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of the Form I-9.
I hereby acknowledge that I have read and agree to the above statements.

Triptych Construction LLC, 19160 N Umpqua Hwy ,Glide, OR 97443 Phone: (541) 673-4903 Fax: (888) 909-0612

Date:

Signature: