

Melhorn Builders Inc is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below:

Applicant Information					
Applicant Name:					
Address:	dress:City, State and Zip Code:				
Telephone Number: Email Address:					
Employment Position Position(s) applying for: Carpen How did you hear about this pe	nter, Carpenter's Helper (full time)				
On what date can you start wo Do you have reliable transport Hourly wage desired:	orking if you are hired?				
Personal Information					
Are you 18 years of age or olde	er? Yes	No			
Are you a U.S. citizen or appro	ved to work in the United States?	No			
What document can you provi	de as proof of citizenship or legal status?				
Will you consent to a mandato	ory controlled substance test? Yes	No			
Do you have any condition wh	ich would require jobaccommodations?	No			
If yes, please describe accomm	nodations required below.				
Have you ever been convicted	of a criminal offense (felony or misdemeanor)? Yes	No			
If yes, please state the nature of	of the crime(s), when and where convicted and disposition of the case:				

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

ob Skills/Qualifications				
lease list below the skills ar	nd qualifications you possess for the	ne position for which you	are applying:	
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V-9.0				
	34.94 (0.00)			
ducation and Training				
ligh School	I			
Name	Location (City, State)	Year Graduated	Degree Earned	
College/University				
Name	Location (City, State)	Year Graduated	Degree Earned	
			U	
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ocational School/Specialize				
Name	Location (City, State)	Year Graduated	Degree Earned	
Ailitary:				
Are you a member of the A	rmed Services? What branch?			
How many years did you se	rve? What rank when discharge	O ?		
What military skills do you	possess that would be an asset fo	r this position?		
Previous Employment				
Employer Name:	Employer Name: Supervisor Name:			
Job Title and/or tasks as	signed:			
Employer Address:		Phone: _		
Dates Employed:	Reason For L	eaving:		
Employer Name:		Supervisor Name:		
Job Title and/or tasks as	signed:			
Dates Employed:	Reason For L	eaving:		
Form I was No. 1		Constitution Nation		
Job Title and/or tasks as	signed:	Dhara		
	Dances Faul			
Dates Employed:	Reason For L	eaving:		

References Please provide 2 personal and profess Reference	ional reference(s) below: Contact Information
Reference	Contact information
Additional Information that would be r	elevant to an employment decision:
AT-WILL EMPLOYMENT	
	e Melhorn Builders Inc is referred to as "employment at will." This means
	nated at any time for any reason, with or without cause, with or without
	s Inc. No representative of Melhorn Builders Inc has authority to enter into regoing "employment at will" relationship. You understand that you
	ou acknowledge that no oral or written statements or representations
	your at-will employment status, except for a written statement signed by
you and either our Executive Vice-Pres	sident/Chief Operations Officer or the Company's President.

Applicant Signature:

Dated:____