

Application for Employment

Date / /

It is the policy of GARDEN CITY CONSTRUCTION, INC. to provide equal employment opportunities to all qualified persons without regard to race, age, color, sex, religion, national origin, ancestry, marital status, disability as defined by law, sexual orientation, or any other basis protected by law.

PERSONAL DATA

Name (First)		(Last)	(Middle)	Social Security Nun	nber	
Present Address	(Street)	(City & State)	(Zip)	(Home Phone)	/	(Business Phone)
Permanent Address (I	f different from present	address)				
Are you over 18 years	old?	If not, can you furnish	a work permit?			
Yes No		Yes	No			
If hired, would you have	e a means of reliable	transportation to and fro	m work?			
Yes No						
If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?						
Yes No						
In accordance with the Immigration Reform and Control Act of 1986, proof of employment eligibility and identification will be required on you first day of employment						
Are you able to perform the essential functions of the job for which If no, please describe the functions that you cannot perform:						ot perform:
you are applying, either with or without reasonable accommodation?						
Yes No						
(We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)						
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EMPLOYMENT DESIRED

Position Desired				Have you ever been employed by us?				
					If yes, give dates Yes No			
Salary Requirements				Date available for employment				
How did you learn of this opening?			Have you ever interviewed with us?					
Hours available	From / To	Sun	Mon	Tues	es Wed Thurs Fri Sat			Sat
Are you available to work overtime, if necessary?			Date available for employment					
Are you applying for regular full-time work? Yes No					Are you applying for regular part-time work? Yes No			
Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? (Convictions for marijuana-related offenses that are more than two years old need not be listed.) Yes No					state nature		, when and wh	nere convicted and
Many of our customers (clients) do not speak English. Do you speak, write or understand any foreign languages? Yes No				If yes,	which lang	uage(s)?		
Convictions are not an absolute bar to employment, but will be considered only in relation to specific job requirements								

EDUCATION

			Did you att Yes Name:	end school under a different name No
High School			Grade Po	int Average
Location	Graduate? Yes	No		
College		No. of years attended		Major GPA
Location				Overall GPA
Major Emphasis	Degree Completed Yes No		Level/Typ	e of Degree
College		No. of years attended		Major GPA
Location				Overall GPA
Major Emphasis	Degree Completed Yes No		Level/Typ	e of Degree
College		No. of years attended		Major GPA
Location				Overall GPA
Major Emphasis	Degree Completed Yes No		Level/Typ	e of Degree

EMPLOYMENT HISTORY

Please complete in detail starting with PRESENT employer	, list ALL employment and expla	in any time not accour	nted for, attach resum	e for additional information.
Any offer of employment will be contingent up	May We contact your current employer prior to making an offer?			
completion of a reference check	Yes No			
ompany Name Supervisor's Name and Phone No.		Dates of Employment		Starting Salary
		From Mo./Yr.	To Mo./Yr.	Ending Salary
Address	Other compensation (e.g. bonus, commission, etc.)			
Your position, title and duties				Amount of other compensation \$ per
Reason for leaving				Did you work in this position under a different name? Yes No If yes, give name:
Company Name	Supervisor's Name and Phone No.	Dates of Employment		Starting Salary
		From Mo./Yr.	To Mo./Yr.	Ending Salary
Address	Other compensation (e.g. bonus, commission, etc.)			
Your position, title and duties	Amount of other compensation \$ per			
Reason for leaving				Did you work in this position under a different name? Yes No If yes, give name:

Company Name	Supervisor's Name and Phone No.	Dates of Employment		Starting Salary	
		From Mo./Yr.	To Mo./Yr.	Ending Salary	
Address				Other compensation (e.g. bonus, commission, etc.)	
Your position, title and duties				Amount of other compensation \$ per	
Reason for leaving				Did you work in this position under a different name? Yes No If yes, give name:	
Company Name	Supervisor's Name and Phone No.	Dates of E	Employment	Starting Salary	
		From Mo./Yr.	To Mo./Yr.	Ending Salary	
Address				Other compensation (e.g. bonus, commission, etc.)	
Your position, title and duties				Amount of other compensation \$ per	
Reason for leaving				Did you work in this position under a different name? Yes No If yes, give name:	

References: List below three persons not related to you, who have knowledge of your work performance within the last three years.

Name	Phone #	Physical Address	Occupation
Name	Phone #	Physical Address	Occupation
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Name	Phone #	Physical Address	Occupation

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that all the information provided on this application (and accompanying resume, if any) is true and complete. I agree that any falsified statements, omissions, or any other form of misrepresentation in the application process may disqualify me from further consideration and may result in termination if discovered at a later time (regardless of the time elapsed before discovery).

I authorize a thorough investigation of my references, past work record, education, credit history, criminal records, and other matters or activities in order to assess my suitability for employment. I agree to fully cooperate in such investigation, and release from all liability or responsibility all persons requesting, communicating, reviewing, or evaluating such information. I further authorize any physician or hospital to release any necessary information pertaining to any position that may be offered to me at this time, or at a later date.

I understand that, according to law, all individuals hired must, as a condition of employment, produce certain documentation to verify their identity and their legal authorization to work in the United States. As a consequence, I understand that any offer of employment would be contingent upon my ability to produce the documentation within the time required by law. I further understand that any offer of employment may be contingent upon my ability to successfully pass a job-related physical examination, which may include a drug screen.

I understand that nothing contained in the application process (including interviews) is intended to create an employment contract between the company and me. I also agree that employment at the company is at will. I understand and agree that my employment would be for no definite period or determinable period of time and may be terminated at any time, for any or no reason, with or without prior notice, by me or the company unless they are made are made in writing and that writing is signed by me and the company's designated official.

I have carefully read all the above and I voluntarily grant the above release. I also agree that if I am hired I will be required and will abide by all the rules and regulations of the company.

Applicant's Signature _____

Date

Voluntary Applicant Data Record

Applicants are considered for all positions and employees are treated during employment without regard to race, color, sex, national origin, religion, marital or veteran status, sexual orientation, medical condition or disability.

As employers, we comply with government regulations and affirmative action responsibilities.

Government agencies require periodic reports of the sex, religion, ethnicity, disability and veteran status of applicants. This data is for analysis and affirmative action only.

Submission of information is voluntary.

Last Nam	е	First Name			Date		Position Applied For
Check On	ne	Check if Ap	oplicable				
Male Fe	emale	Vietnam V	eteran	Disabled V	eteran	Disa	bled Individual
Check One							
Other	Black	Hispanic /	American	Indian/Alask	an Native	Asia	an/Pacific Islander

Applicant Information (Keep in a secure file separate from personnel records)

The following information is required by law enforcement agencies and other entities for identification purposes when conducting a background check. It is confidential and will not be used for any other purpose.

		Please Print Clearly	
Print Full Leg	gal Name:		Sex: 🗆 M 🛛 F
Other name			
Name:		From-To Dates:	to
Name:		From-To Dates:	to
Birth Date (n	nm-dd-yyyy)	U.S. Social Security #:	<u> </u>
Non-U.S. IDs	s (if any) & Issuing Country:		
Driver's Lic	ense #s (last 7 years):		
Current Drive	er's License #	Issuing State/County:	
Prior Driver's	s License #	Issuing State/County:	
Home Addre	esses (for the last 7 years, list cu	urrent home address first):	
Street:		City:	State:
Zip:	County:	From-To Dates:	
Street:		City:	State:
Zip:	County:	From-To Dates:	
Street:		City:	State:
Zip:	County:	From-To Dates:	
Street:		City:	State:
Zip:	County:	From-To Dates:	

Additional Information:

IMPORTANT – PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Garden City Construction ('the Company") may obtain information about you for employment purposes from the following consumer reporting agency ("the Agency"), A Matter of Fact, 233 S Auburn St #140, P.O. Box 1113, Colfax, CA 95713, Phone: 530-346-6626/800-957-3272, Fax: 530-346-6620, or from another outside organization. The Agency's privacy policy can be found at <u>www.amof.info</u>. Thus, you may be subject to a "consumer report" and/or "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may be obtained at any time after receipt of your authorization and, if you are hired, throughout your employment and education references, driving history, professional licenses and credentials. Credit history will be requested only in accordance with applicable law. These reports may contain information regarding your use of social media, and other publically accessible information. Social media includes, but is not limited to, social networking websites (i.e., Facebook and others), professional networking websites (i.e., LinkedIn and others), blogs, and other online media.

You have the right, upon written request made within a reasonable time after receipt of this notice, to ask the Company to disclose the nature and scope of any investigative consumer report. You also may request a copy of that report from the Company. If anyone other than the Agency furnishes an investigative consumer report, the Company will provide relevant contact information within five business days of your request. An "investigative consumer report" is a background report that includes information from personal interviews (except in California, where that term includes background reports with or without personal interviews). Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by the Agency. The scope of this disclosure and authorization is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

Maine, Massachusetts, and New Jersey applicants or employees only: You have the right to inspect and promptly receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly. Minnesota applicants or employees only: You have the right, upon written request to the Agency, to receive a complete and accurate disclosure of the nature and scope of any consumer report. The Agency must make this disclosure within five days of receipt of your request or of the Company's request whichever is later. New York applicants or employees only: You have the right to request whether the Company requested a consumer report and, if so, the Company will give you the name and address of the report's provider if other than the Agency. Washington applicants or employees: The Company will provide the disclosure described above concerning its procurement of an investigative consumer report either five days after receiving your request or after requesting the investigative consumer report, whichever is later. You have the right to as the Company to provide you with a summary of your rights under the Washington Fair Credit Reporting Act. California, Minnesota and Oklahoma applicants or employees only: Please check this box □if you would like to receive from the Agency a copy of any report furnished by the Agency to the Company pursuant to your authorization below.

ACKNOWLEDGEMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the procurements of "consumer reports" and/or "investigative consumer reports "at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by A Matter of Fact, 233 S Auburn St #140, P.O. Box 1113, Colfax, CA 95713, Phone: 530-346-6626/800-957-3272, Fax: 530-346-6620, www.amof.info, another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

California applicants or employees only: I acknowledge receipt of the NOTICE REGARDING BACKGROUND CHECKS AND CREDIT CHECKS PURSUANT TO CALIFORNIA LAW and certify that I have read and understand the document. **New York applicants or employees only:** I acknowledge receipt of ARTICLE 23-A OF NEW YORK CORRECTION LAW and certify that I have read and understand the document.

I authorize the background check(s) described above. Signed:

Date:

Revised 1/12/2013