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Papich Construction Company/Sierra Pacific Materials is an Equal Opportunity Employer and does not discriminate against any individual in any phase of employment in accordance with the requirements of local, state and federal law. We also provide reasonable accommodations to qualified individuals with disabilities in accordance with the Americans with Disabilities Act and applicable state and local law. We are a drug and alcohol-free workplace.

APPLICATION FOR EMPLOYMENT

Please carefully read and answer all questions. You will not be considered for employment if you fail to answer all the questions clearly, completely and accurately on this application. You may attach a resume, but all questions must be answered. 'See Resume' is not an acceptable answer in any field.

NAME: _____

DATE: _____

EMPLOYMENT DESIRED	
Position Applying For: _____	
How were you referred to us for employment?	Minimum acceptable salary: <i>(do not leave blank)</i>
Are you currently employed? <input type="checkbox"/> YES <input type="checkbox"/> NO *We do NOT contact your current employer unless you have given us permission.	
Date available to start work after being notified you are hired: _____	
Type of employment desired: <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> TEMPORARY Dates Available: From: _____ To: _____	Are you able to work overtime if necessary? <input type="checkbox"/> YES <input type="checkbox"/> NO Are you able to work evenings if necessary? <input type="checkbox"/> YES <input type="checkbox"/> NO Are you able to work weekends if necessary? <input type="checkbox"/> YES <input type="checkbox"/> NO Are you able to travel if the job requires it? <input type="checkbox"/> YES <input type="checkbox"/> NO
Are there any special scheduling requirements/considerations you have? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>If YES, please explain:</i> * Should your availability change during the course of your employment, it may impact your employment status based on business needs. While we may be able to accommodate your availability limitations upon hire, we do not guarantee that we will be able to support these limitations in the future. Should our business needs change, we may require an adjustment in your availability in order to maintain employment status.	
Are you able to perform the essential functions of the position with or without reasonable accommodations? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If hired, can you present documentation of your legal right to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO We participate in E-Verify. We will provide the Social Security Administration (SSA) and Department of Homeland Security (DHS) with information from your I-9 form to confirm work authorization.	
Have you ever been employed with us before? <input type="checkbox"/> YES <input type="checkbox"/> NO Dates: _____ Position(s): _____ Supervisor: _____	
Do you have any friends/relatives currently employed by us? <input type="checkbox"/> YES <input type="checkbox"/> NO Name: _____ Dates: _____ Position(s): _____ Supervisor: _____	

PERSONAL INFORMATION

Name: (First) _____ (Middle Initial) _____ (Last) _____

Address: (Street Number and Name) _____ (Apt.#) _____ (City) _____ (State) _____ (Zip) _____

Phone: () _____ **Alternate phone:** () _____ **E-Mail address:** _____

Have you ever worked or attended school under another name? YES NO
(So we may verify your employment history)
If YES, under what name(s)? _____

Are you over the age of 18? YES NO
If NO, please attach Work Permit.

Do you have a valid driver's license, if necessary, for the job? YES NO **Issuing State:** _____ **Class:** _____

Endorsements: (check those which you currently have)
 Hazardous Material Tankers Passenger School Bus Doubles/Triples Tank with Hazardous Materials

EDUCATION AND TRAINING

TYPE	NAME AND LOCATION	# OF YEARS COMPLETED	GRADUATED?	FIELD OF STUDY
High School			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> Diploma <input type="checkbox"/> GED
College/University			<input type="checkbox"/> YES <input type="checkbox"/> NO	Degree Major
College/University			<input type="checkbox"/> YES <input type="checkbox"/> NO	Degree Major
Vocational/Trade			<input type="checkbox"/> YES <input type="checkbox"/> NO	Field of Study
Business			<input type="checkbox"/> YES <input type="checkbox"/> NO	Field of Study
Other				

SKILLS & QUALIFICATIONS

Professional memberships, licenses, certification or registrations: List any relevant to the position for which you are applying.

Knowledge, Skills & Abilities (KSA's): List any special training, skills, experience, or abilities relevant to the position for which you are applying.

Types of computers, software, and other equipment: List computer systems and software packages of which you have a working knowledge and note your level of proficiency (basic, intermediate, expert).

EMPLOYMENT HISTORY: You must complete this section in its entirety, EVEN if furnishing a resume'. Please give accurate and complete information. Start with CURRENT or MOST RECENT employer and work backwards. Account for all periods of employment, including self-employment, part-time work, temporary work, and any gaps in employment for the previous seven (7) years. If you've had more than four jobs in the past 7 years, use additional paper to explain.

1 Company Name and Address: _____ May we contact? YES NO

Telephone: ()	Dates of Employment (Month and Year): _____ to _____	Reason for Leaving:
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Position(s) held: _____

Duties and Responsibilities: _____

Name of Supervisor / Title:	Telephone: () ext. _____
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2 Company Name and Address: _____ May we contact? YES NO

Telephone: ()	Dates of Employment (Month and Year): _____ to _____	Reason for Leaving:
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Position(s) held: _____

Duties and Responsibilities: _____

Name of Supervisor / Title:	Telephone: () ext. _____
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3 Company Name and Address: _____ May we contact? YES NO

Telephone: ()	Dates of Employment (Month and Year): _____ to _____	Reason for Leaving:
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Position(s) held: _____

Duties and Responsibilities: _____

Name of Supervisor / Title:	Telephone: () ext. _____
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4 Company Name and Address: _____ May we contact? YES NO

Telephone: ()	Dates of Employment (Month and Year): _____ to _____	Reason for Leaving:
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Position(s) held: _____

Duties and Responsibilities: _____

Name of Supervisor / Title:	Telephone: () ext. _____
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Have you ever been discharged/terminated or asked to resign from employment? YES NO
If YES, please explain:

Please account for any periods of unemployment here:

From _____	To _____	Reason: _____
From _____	To _____	Reason: _____
From _____	To _____	Reason: _____

PROFESSIONAL REFERENCES: List persons NOT related to you or living in your household, whom you have known for at least one year and have had a working relationship with.

Name:	Nature of relationship:
Telephone: Email address:	Years acquainted:
Name:	Nature of relationship:
Telephone: Email address:	Years acquainted:
Name:	Nature of relationship:
Telephone: Email address:	Years acquainted:

APPLICANT CERTIFICATION AND AGREEMENT-PLEASE READ CAREFULLY

Your signature below acknowledges that you have read, understood, and voluntarily agree to the terms set forth below:

I declare each of the answers given to the questions on this application to be complete and true to the best of my knowledge. I understand that any falsification, concealment, misrepresentation or omission made on this application form, during interviews, or at any other time during the hiring process will, upon discovery, may be cause to cancel further consideration of this application or for my dismissal, if I am employed, and that **Papich Construction Company, Inc./Sierra Pacific Materials** (the "Company") are not liable if my employment is so denied or terminated. Unless otherwise noted, I authorize the Company to investigate all statements given in this application, including contacting former employers, references, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, and/or job interview.

I further authorize the Company to contact any additional references of their choosing and make any necessary investigations and inquiries of my character, previous employment or matters related to my employment. I further authorize any employer, school, company, or individual to provide the Company with any information they deem appropriate. I release the Company and all providers of information from any liability, claims & damages that may directly or indirectly result from furnishing and/or receiving this information. I understand if selected for employment, I am required to successfully pass a drug and alcohol screening upon hire, and I understand and agree I will be subject to the Company's drug and alcohol testing policy during my employment.

I understand that any employment offered to me by the Company will not be for any specified or guaranteed period, and that, accordingly, my employment is at-will and terminable by me at any time, with or without cause. I understand and agree that the Company may similarly end my employment or modify my status (for example, change my position, demote me, alter my pay or benefits) at any time, with or without cause or advance notice. I also understand that this at-will agreement will remain in effect throughout the duration of my employment and may only be changed by a written agreement signed by an authorized Officer of the Company.

**My signature certifies I have read, understood, and agree with the terms above,
and all statements contained in this application for employment.**

Applicant Signature

Date