



WEAVER BROS. CONSTRUCTION CO., INC.

1629 RTE. 3A
 BOW, NH 03304
 T: 603-228-8631
 F: 603-228-5375

E: jobs@wbcc.biz

Application for Employment

Employee Name: _____
 Last Name First Name Middle Initial

Address: _____
 Street City State/Zip Code

Mailing Address If Different: _____
 Street City State/Zip Code

Contact Numbers: _____
 Home Phone Mobile Phone Other

Position Applying For: _____ Date Available: _____ Salary Desired: _____

If hired, can you provide proof that you are eligible to work in the United States? YES NO
 If hired, can you provide proof that you are over 18 years of age? YES NO
 Have you ever been convicted of, or pled guilty to, a felony? YES NO

If "Yes", explain: _____

(An answer of "Yes" will not necessarily bar you from employment; all circumstances will be considered)

Education and Skills

| Education: School Name/Type | School Address | Major/Degree | Graduate? | | Graduation Date (MM/YYYY) |
|--------------------------------|----------------|--------------|-----------|----|------------------------------|
| | | | Yes | No | |
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Employment History and References

Employment History: (Please list most recent employer first. Attach additional pages as needed.)

| | | | |
|---------------------|---|----------------|--------|
| Company Name: | Street Address: | | |
| City: | State: | Zip: | Phone: |
| Supervisor Name: | May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Supervisor Title: | Starting Salary: | Ending Salary: | |
| Position: | Start Date: | End Date: | |
| Responsibilities: | | | |
| Reason for Leaving: | | | |

| | | | |
|---------------------|---|----------------|--------|
| Company Name: | Street Address: | | |
| City: | State: | Zip: | Phone: |
| Supervisor Name: | May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Supervisor Title: | Starting Salary: | Ending Salary: | |
| Position: | Start Date: | End Date: | |
| Responsibilities: | | | |
| Reason for Leaving: | | | |

| | | | |
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| Supervisor Title: | Starting Salary: | Ending Salary: | |
| Position: | Start Date: | End Date: | |
| Responsibilities: | | | |
| Reason for Leaving: | | | |

References: (Please list professional references before personal references.)

| Name: | Address: | Phone: | Relationship: |
|-------|----------|--------|---------------|
| | | | |
| | | | |
| | | | |
| | | | |

Employment Application - Disclaimer & Signature

Have you applied to this company before: _____ Where/When? _____

Were you referred by anyone? _____

Are you able to perform the duties or essential job functions of the position being sought? YES NO

If no, what the specific limitations on such employment? _____

Is there some type of accommodation(s) that would enable you to perform the functions of the job? _____

If yes, please describe: _____

List any skills/training/achievements as they pertain to the position you are applying for: _____

Please read the following statements carefully; they constitute the conditions under which you might be employed by this company.

The information that I have provided on this application is accurate to the best of my knowledge and subject to verification by the company. I understand that any misrepresentation by me on the data set forth in this application shall be just cause for termination of my employment. I understand that this is an application for employment and that no employment contract is being offered.

Federal and or State law prohibit discrimination; this company does not discriminate in hiring and employment on the basis of race, color, religion, national origin, sex, age, marital status, or disability. We are an EEO and Affirmative Action Employer.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS

SIGNATURE OF APPLICANT

DATE OF APPLICATION

-----FOR WEAVER BROS.'S USE ONLY - DO NOT WRITE BELOW THIS LINE-----

APPLICATION REVIEWED BY: _____

REFERENCES WERE CONTACTED -- NOTES: _____

INTERVIEW SCHEDULED FOR: _____

NOTES: _____

APPLICANT NOTIFIED OF HIRE/NON-HIRE ON: _____

TO BEGIN WORK ON _____