

# JOHNSON & PACE INCORPORATED PRE-EMPLOYMENT APPLICATION

An Equal Opportunity Employer

DATE:

## PERSONAL INFORMATION

Name (last, first, middle):		Social Security No.:
Present Address (street, city, state and zip):		
Permanent Address (street, city, state and zip):		
Phone No.: (    )    -	Driver's License No. & State:	
In Case of Emergency Notify (name, address, phone):		
Are you a U.S. citizen?	<input type="checkbox"/> yes <input type="checkbox"/> no	Are you 18 years or older? <input type="checkbox"/> yes <input type="checkbox"/> no
Are you prevented from lawfully becoming employed in this country because of Visa or immigration status? <input type="checkbox"/> yes <input type="checkbox"/> no		

## EMPLOYMENT DESIRED

Position:	Avail. Start Date:	Salary Desired:
Are you currently employed?	If so, may we inquire of your present employer?	
Have you ever applied to J&P before?	When?	
Have you ever worked for J&P before?	When?	
Reason for Leaving:		
Name of Previous Supervisor at J&P:		
Who referred you to J&P?	<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Newspaper <input type="checkbox"/> Friend
<input type="checkbox"/> College Placement Service	<input type="checkbox"/> Walked In	<input type="checkbox"/> Other:

## EDUCATION

School Level	Name & Location of School	No. of Years Attended	Did You Graduate?	Subjects Studied
Grammar School				
High School				
College				
Trade or Correspondence School				

## SERVICE RECORD\*

Branch of Service:	Discharge Date & Rank:
Present Membership in National Guard or Reserves:	Date Obligation Ends:

\* Your current or previous service will in no manner adversely affect your consideration of employment at J&P.

**FORMER EMPLOYERS** (List below your last three employers, start with the most recent employer)

Name and Address of Present or Last Employer:

Starting Date (month/year):

Leaving Date (month/year):

Starting Salary (specify hourly or yearly):

Ending Salary (specify hourly or yearly):

Job Title:

May we contact your supervisor?

Name and Title of Supervisor:

Phone No.:

Description of Work:

Reason for Leaving:

Name and Address of Present or Last Employer:

Starting Date (month/year):

Leaving Date (month/year):

Starting Salary (specify hourly or yearly):

Ending Salary (specify hourly or yearly):

Job Title:

May we contact your supervisor?

Name and Title of Supervisor:

Phone No.:

Description of Work:

Reason for Leaving:

Name and Address of Present or Last Employer:

Starting Date (month/year):

Leaving Date (month/year):

Starting Salary (specify hourly or yearly):

Ending Salary (specify hourly or yearly):

Job Title:

May we contact your supervisor?

Name and Title of Supervisor:

Phone No.:

Description of Work:

Reason for Leaving:

**REFERENCES**

Name	Address & Phone No.	Business	Years Acquainted

**GENERAL**

Subjects of Special Study:

Special Skills/Training:

Specific Knowledge of Software Including AutoCAD, Terramodel and Other CAD Programs:

Special Interests in Engineering/Architecture/Surveying:

**ADDITIONAL QUESTIONS**Have you ever been convicted of a felony?  yes  no

If yes, please describe:

Have you been convicted of a misdemeanor within the last 5 years?  yes  no

If yes, please describe:

Have you had your licensed revoked or suspended within the last 5 years?  yes  noIs your license currently revoked or suspended?  yes  no

If yes, to either of the above questions, please describe:

**AUTHORIZATION**

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

I also certify that I do not have any detectable amounts of prohibited substances in my system at the time of completing this pre-employment application. I understand that if my drug screen turns out positive for a prohibited substance, I will not be eligible for hire, or if I am hired pending the outcome of such a test, I will be subject to immediate termination.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the company. I understand that no company representative, other than it's president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing."

Signature:

Date: