



Southern Constructors, Inc.
 1150 Maryville Pike (37920)
 P.O. Box 9476
 Knoxville, TN 37940
 Ph: (865) 579-5351 / Fax: (865) 579-4328

Once complete, print out and fax to
 (865) 579-4328

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis, including race, color, age, sex, religion, or national origin.

PERSONAL INFORMATION:

DATE: TN DRIVER'S LICENSE #:

NAME: ADDRESS:

TELEPHONE NO.: POSITION: DATE YOU CAN START:

VOCATIONAL/TRADE TRAINING:

SPECIALSKILLS/TRADES:

WORK EXPERIENCE: (LIST LAST THREE EMPLOYERS)

<u>DATES</u>	<u>NAMES & ADDRESS</u>	<u>REASON FOR LEAVING</u>
FROM: <input type="text"/>	<input type="text"/>	<input type="text"/>
TO: <input type="text"/>	<input type="text"/>	<input type="text"/>
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FROM: <input type="text"/>	<input type="text"/>	<input type="text"/>
TO: <input type="text"/>	<input type="text"/>	<input type="text"/>

IN CASE OF EMERGENCY, CONTACT:

ADDRESS: PHONE NO.:

I AUTHORIZE INVESTIGATIONS OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

DATE: SIGNATURE:

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Answer the following questions with a Yes or No:

Are you capable of lifting items weighing up to 75 pounds?

Are you capable of using a 90 pound jackhammer for:

1 - 2 hours

3 -4 hours

5 - 8 hours

10 - 12 hours

Are you capable of operating power tools/equipment safely?

Are you capable of working on bridges over water?

Are you capable of working on bridges over land?

Are you capable of working heights over 50 feet?

Are you capable of working heights over 100 feet?

Are you capable of working underneath structures in close spaces?

Are you capable of working underneath structures in close spaces?

Are you capable of crawling from one area to another to gain access?

Are you capable of using standard construction hand tools?

Are you capable of using/wearing all required safety equipment?

Are you capable of walking through construction areas that may contain holes or narrow walkways?

Are you capable of working 8 hour days?

Are you capable of working 10 hour days?

Are you capable of working 12 hour days?

Do you have a valid driver's license?

CDL License or Regular?

I HEREBY CERTIFY THAT ALL INFORMATION ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY MISREPRESENTATION OR OMISSION OF FACTS WILL RESULT IN THE TERMINATION OF MY EMPLOYMENT

Signature

Date

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I hereby consent to submit to urinalysis and/or other tests as shall be determined by Southern Constructors, Inc. in the selection process of applicants for employment, for the purpose of determining the drug content thereof.

I hereby consent to the reimbursement of the cost of the drug screen and/or other tests to Southern Constructors, Inc. in the event of failure to show up for appointment or costs being deducted from last paycheck if employed for less than six (6) weeks.

I agree that **Knoxville Medical Center and/or Other Out of Town Facilities** may collect these specimens for these test and may test them or forward them to a testing laboratory designated by the company for analysis.

I further agree to and hereby authorize the release of the results of said test to the company.

I understand that it is the current illegal use of drugs and/or abuse of alcohol that prohibits me from being employed at this Company.

I further agree to hold harmless the Company and its agents (including the above named physician or clinic) from any liability arising in whole or part out of the collection of specimens, testing, and use of the information from said testing in connection with the Company's consideration of my employment application.

I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

Applicant Name:

S.S.#:

Date: