

**R.H. Tyson Construction, Inc.  
6155 Sundance Road  
Blackshear, Ga 31516**

**APPLICATION FOR EMPLOYMENT**

**PERSONAL INFORMATION**

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last
First
MI

Address: \_\_\_\_\_  
Street
City
State
Zip

Telephone \_\_ (\_\_\_\_) \_\_\_\_\_ Are you 18 Yrs or Older? \_\_\_Yes \_\_\_No

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Month
Day
Year

Do you have valid Driver License? \_\_\_Yes \_\_\_No DL# \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? \_\_\_Yes\_\_\_No

**EMPLOYMENT DESIRED**

Position \_\_\_\_\_ Date You \_\_\_\_\_ Salary \_\_\_\_\_  
 Desired \_\_\_\_\_ Can Start \_\_\_\_\_ Desired \_\_\_\_\_

Are you employed now? \_\_\_\_\_ If so, May we inquire of your Present Employer? \_\_\_\_\_  
 Ever applied to this company before? \_\_\_\_\_ Where? \_\_\_\_\_ When: \_\_\_\_\_  
 Referred by: \_\_\_\_\_

EDUCATION	NAME/LOCATION OF SCHOOL	NUMBER OF YEARS COMPLETED	DID YOU GRADUATE?	SUBJECTS STUDIED
High School				
College				
Bus. or Trade School				
Professional School				

**GENERAL**

Special Skills: \_\_\_\_\_

Current certifications, including expiration date (OSHA 10 & 30, First Aid, Erosion Control, Confined Space, Scaffold Training, Forklift, Scissor Lift, Power Tools) \_\_\_\_\_

Present Membership in US Military or Naval Service \_\_\_\_\_ Rank \_\_\_\_\_ National Guard or Reserves \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME? \_\_\_\_ Yes \_\_\_\_ No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. \_\_\_\_\_

**FORMER EMPLOYMENT** (List below your last three employers, starting with last one first)

Name of employer _____ Address _____ City, State, Zip Code _____ Phone number _____	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer _____ Address _____ City, State, Zip Code _____ Phone number _____	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your Last Job Title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer _____ Address _____ City, State, Zip Code _____ Phone number _____	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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**REFERENCES**

Please list two references other than relatives or previous employers

Name \_\_\_\_\_

Name \_\_\_\_\_

Position \_\_\_\_\_

Position \_\_\_\_\_

Company \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

\_\_\_\_\_

In Case of

Emergency Notify \_\_\_\_\_

Name

Address

Phone

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.

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 its 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.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

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**DO NOT WRITE BELOW THIS LINE**

Interviewed by: \_\_\_\_\_ Date \_\_\_\_\_

Remarks: \_\_\_\_\_

Hired:  Yes  No      Position: \_\_\_\_\_ Dept: \_\_\_\_\_

Salary/Wage: \_\_\_\_\_ Start Date: \_\_\_\_\_

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*This form has been designed to strictly comply with State and Federal Fair Employment Practice Laws Prohibiting Employment Discrimination.*