

LAND-TECH ENTERPRISES, INC.



APPLICATION FOR EMPLOYMENT

Equal access to programs, services and employment is available to all persons. Those applications requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Date: _____ Position Applied For: _____

Name: _____ Social Security #: _____
last first middle

Address: _____
STREET CITY STATE ZIP CODE

Telephone #: _____ Mobile #: _____ E-mail address: _____

If you are under 18, and it is required, can you furnish a work permit? YES NO

If no, please explain: _____

Have you been employed here previously? YES NO

Are you legally eligible for employment in this country? YES NO

PROOF OF CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT

Date available for work: _____ What is your desired wage? _____

Type of employment desired: FULL-TIME PART-TIME TEMPORARY SEASONAL

Are you able to meet the attendance requirements of the position? YES NO

Have you been convicted of a crime in the last seven (7) years? YES NO

If yes, please explain: _____

Driver's license number (if driving is an essential job function): _____ State: _____

Skills and Qualifications

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Education

NAME AND LOCATION	LEVEL COMPLETED	DATES ATTENDED	COURSE OF STUDY

Hire Date: _____
 Pay Rate: _____
 Location: _____
 Empl #: _____

Job Title: _____
 Dept: _____
 Supervisor: _____
 Badge #: _____

Personal Emergency Contacts

NAME	PHONE	RELATIONSHIP

Work Experience

EMPLOYMENT DATES	EMPLOYER
JOB TITLE	ADDRESS & PHONE #
SUPERVISOR	JOB DUTIES
HOURLY RATE/SALARY	REASON FOR LEAVING
EMPLOYMENT DATES	EMPLOYER
JOB TITLE	ADDRESS & PHONE #
SUPERVISOR	JOB DUTIES
HOURLY RATE/SALARY	REASON FOR LEAVING
EMPLOYMENT DATES	EMPLOYER
JOB TITLE	ADDRESS & PHONE #
SUPERVISOR	JOB DUTIES
HOURLY RATE/SALARY	REASON FOR LEAVING

Applicant Statement

I certify that all the information contained in this application and in any resume, provided by me or any party representing my interests, is correct and complete to the best of my knowledge. I understand that any false statements, misrepresentations or omissions made by me on this application or any supplement thereto, will be sufficient grounds for rejection of this application or discharge after employment.

I give the employer the right to obtain and verify pertinent information concerning me, from former employees and others, and I release all those providing or requesting such information from any liability that may arise by truthful disclosures or such investigations.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause, and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing, and signed by an authorized officer.

I understand it is the company's policy not to refuse to hire a qualified individual with a disability because of the person's need for a reasonable accommodation, as required by the ADA.

I also understand that if I'm hired, I will be required to provide proof of identity and legal work authorization.

Your signature acknowledges you have read and agree to the statements above.

Applicant's Signature: _____ **Date:** _____