

Employment Application

Applicant's Information Address: City, State, Zip: Phone Number: Email Address: **Employment Position** Position Applying For: _____ How did you hear about the position? ______ What days are you available for work? What hours or shifts are you available for work? ______ If needed, are you available to work overtime? What date can you start? Do you have reliable transportation to and from work? What is your desired salary? **Personal Information** Do you have friends, relatives, or acquaintances working for Capstone Structures? _____ If yes, state name & relationship: Are you 18 years of age or older? ____ Are you a U.S. citizen or approved to work in the United States? Do you have any conditions which require job accommodations? _____ If yes, please describe accommodations required:

Note: Capstone Structures complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants to perform essential functions.

•		•	r)? victed and disposition of the
date of the offense, the n	ature of the offense, includi	ing any significant deta	viction of a criminal offense. The ills of the event, the surroundings for may, however, be considered.
Skills & Qualifications			
Please list below the skill	s and qualifications you pos	sess for the position fo	or which you are applying:
Educations and Training			
College/University Name	Location (City, State)	Year Graduated	Degree Earned
Ivairie	Location (City, State)	Teal Gladuated	Degree Larrieu
Vocational School/Special	lized Training Location (City, State)	Year Graduated	Degree Earned
High School			
Name	Location (City, State)	Year Graduated	Degree Earned
What was your n		ed?	
Previous Employment			
(List the most recent emp	oloyer first)		
Employer's Name:			
Address: City, State, & Zip:			
Phone:			
Job Title:			

Supervisor's Name:	
Date's Employed: Reason for Leaving:	
neason for Leaving.	
Employer's Name:	
Address:	
City, State, & Zip:	
Phone:	
Job Title:	
Supervisor's Name:	
Date's Employed:	
Reason for Leaving:	
Employer's Name:	
Address:	
City, State, & Zip:	
Phone:	
Job Title:	
Supervisor's Name:	
Reason for Leaving:	
04 14/:II Francisco	
At-Will Employment	on you and the Canatana Structures is referred to as "ampleyment at will " This
	en you and the Capstone Structures is referred to as "employment at will." This yment can be terminated at any time for any reason, with or without cause, with or
	or Capstone Structures. No representative of Capstone Structures has authority to
	ent contrary to the foregoing "employment at will" relationship. You understand that
	at will," and that you acknowledge that no oral or written statements or
	ing your employment can alter your at-will employment status, except for a written
	u and either our Associate Principal or Principal.
statement signed by yo	a dia citiei oui 763ociate i filicipai of i filicipai.
Canstone Structures is a	a drug-free employer and equal opportunity employer. By accepting a position with
•	u agree to consent with the random drug testing policy as described in the employee
	ee handbook is available upon request. This application will not be used for limiting
· ·	ant from consideration for employment on a basis prohibited by local, state, or
	applicant need reasonable accommodation in the application process, please contract
Capstone representat	
a capacone representat	
By signing, you agree ar	nd understand the terms and conditions described here within.
Applicant Signature:	Date: