APPLICATION FOR EMPLOYMENT AT PUETZ DESIGN BUILD THIS APPLICATION IS GOOD FOR 60 DAYS

FEDERAL LAW OBLIGATES US TO PROVIDE REASONALBE ACCOMODATION TO THE KNOWN DISABILITIES OF APPLICANTS AND EMPLOYEES, UNLESS TO DO SO WOULD IMPOSE AN UNDUE HARDSHIP. PLEASE LET US KNOW IF YOU NEED AN ACCOMODATION TO COMPLETE THE APPLICATION PROCESS OR TO PERFORM ANY ESSENTIAL ELEMENTS OF THE POSITION SOUGHT.

IMPORTANT: in order for this application to be considered, this must be in original form and all questions must be answered. (If a question does not apply, please mark "N/A", not applicable)

Applicants are considered for all positions and employees are treated during employment, without regard to race, color, religion, sex, national origin, age, disability, or any other prohibited basis of discrimination, as provided under applicable state and federal law.

PLEASE PRINT								
N								
Name:	Last			Middle		First		
	Eust			Madie		11150		
Address:								
	Number	S	treet/RR		City	State	Zip	
Telephone: ()	Social Security Number:						
Date of Application	n:							
	l For:							
					Employment Agency	Other		
	application here before?							
	n employed here before	?Yes_	_No if yes, giv	ve date				
	now?YesNo							
	ur present employer?							
	from lawfully becoming						1.1 1	
					nt authorization and identit			
	re us that you can do so				ship or immigration status a	it the time you are if	iterviewed, piease	
be prepared to assu	ite us tilat you can do so	mmediad	ery upon being	illed.				
On what date would	d you be available for w	ork?						
Are you available t	o work:Full-time	Part	-time Ter	nporary				
, , , , , , , , , , , , , , , , , , ,	What days? S M	ИТ W Т	F S	1 3				
Are you on lay-off	and subject to recall? _							
	victed of a felony within							
	ot necessarily disqualify	applicant	from employme	ent. The recen	cy, severity, and pertinence	of the conviction to	the job will be	
considered.)								
If yes, explain								
Votoron of the U.S.	. Military Service?	Vas	No If you Dea	nah				
						race color religion	say disability or	
List professional, trade, business, or civic activities and offices held. (You may exclude those which indicate race, color, religion, sex, disability or national origin):								
national origin)								
					Any moving vi	olationsYes	No	
Please describe								
How did you get yo	our present job?							

What part(s) appeals least to you?			
What was the best job you have had (and why)?			
What goals have you set for yourself? A. Business goals			
B. Personal goals			
What are the obstacles to your success?			
How would you describe yourself at making decisions?			
Have you had supervisory responsibility?YesNo In what roles? (Be specific, including number supervised)			
What was your most important accomplishment as a supervisor?			
What activities appeal to you most? (Rank 1 to 8, 1 being your first preference.) Personal ProductionExpeditingTrainingSupervisingStaffingOrganizingAnalyzingPlanning As you view yourself, what would you list as your strong points?			
What are your possible weak points?			
What valid criticisms have been made of your work?			
What have you done to overcome these criticisms?			
What do you feel you have been able to accomplish in your chosen field of work?			
What would you like to add that has not been asked?			
Do you read?OccasionallyFrequentlyNever What types of articles or books?			

_Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disability or other protected status.

	Employer		Dates Employed		W 1 D C 1	
1.	Address		From To		Work Performed	
	Telephone Number(s)		Hourly Rate/Salary Starting Final			
-	Job Title	Supervisor	Starting 1 mar			
-	Reason For Leaving					
2.	Employer		Dates Employed From To		Work Performed	
	Address					
_	Telephone Number(s)		Hourly Rate/Salary Starting Final			
	Job Title	Supervisor				
_	Reason For Leaving					,
3.	Employer		Dates Employed From To		Work Performed	
	Address					
_	Telephone Number(s)		Hourly Rate/Salary Starting Final			
	Job Title	Supervisor				
_	Reason For Leaving					
			EDUCATIO	N		
		Elementary School	High School	Vocational/ College	Graduate/ Professional	
Sch	ool Name & Location					
Yea	ars Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4	
Dig	loma					
Des	scribe Course of Study					
trai skil	ccribe any specialized ning, apprenticeship, ls and extra-curricular vities.					
Des	scribe any honors you have eived.					

State any additional information you feel may be helpful to us in considering your application.	
Do you have a current craft license or certification, if one is required	I for your craft?YesNo if yes, identify
Do you have your own tools?YesNo if yes, what tools	do you have?
What types of construction equipment can you operate?	
	FERENCES
Give name, address and telephone number of three references that a	re not related to you and are not previous employers.
1(Name)	() Phone #
(Address)	
2	()
(Name)	Phone #
(Address)	()
(Name)	Phone #
(Address)	
APPLICA	NT'S STATEMENT
understand that any false or misleading information provided may re APPLICATION IS NOT A CONTRACT OF EMPLOYMENT AND	O THAT IF HIRED, REGARDLESS OF ANY ORAL REPRESENTATIONS ETWEEN THE COMPANY AND MYSELF IS <u>TERMINABLE AT WILL</u> .
whether I can perform the job duties. In addition, I understand a druthe Company to make a thorough investigation of my past employm	upon a health evaluation by a doctor selected by the Company, to determine ag and alcohol test may be required depending upon Company policy. I authorize ent, education, and job-related activities and I release from all liability all also indemnify this Company against any liability, which might result from
Additionally, I authorize the Company to supply my employment re government agency, or other party, with an interest that the Company	cord, in it's sole discretion, in whole or in part, to any prospective employer, y deems appropriate.
Signature of Applicant	Date