



LandTech / ShoreTech

Revetments, Seawalls, Geo-Technical Site Work, Erosion Control, Storm Water Management, Landscaping

616-928-0786 landtechwmi.com



APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, veteran status, or any other legally protected status.			
Position(s) applied for:		Date of Application:	
How did you learn about us?	<input type="checkbox"/> Friend	<input type="checkbox"/> Inquiry	<input type="checkbox"/> Employment Agency
<input type="checkbox"/> Relative	<input type="checkbox"/> Media Ad	<input type="checkbox"/> Other _____	

Last Name	First Name	Middle Name	
Address	City	State	Zip
Email	Telephone	SSN	

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No
If Yes, give date: _____

Do any of your friends or relatives work here? Yes No
If Yes, state name and relationship: _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country from Visa / Immigration Status? Proof of citizenship or immigration status will be required upon employment. Yes No

Date available for work: _____ Desired salary range: _____

Shift available for work: Full Time Part Time

Temp. Temp. _____ to _____

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

SCHOOL	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS FINISHED	DIPLOMA/DEGREE
HIGH SCHOOL				
UNDERGRAD				
GRADUATE				
OTHER (SPECIFY):				

WORK EXPERIENCE

Start with your present or last job, going back. Include any job-related military service assignments / volunteer activities. You may exclude organizations that indicate race, color, religion, gender, origin, disabilities, or other protected status.

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone			
Job Title	Hourly/Salary Rate		
Supervisor	Starting	Final	
Reason for Leaving	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>		
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone			
Job Title	Hourly/Salary Rate		
Supervisor	Starting	Final	
Reason for Leaving	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>		
Employer	Dates Employed		Work Performed
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Employer	Dates Employed		Work Performed
Address	From	To	
Telephone			
Job Title	Hourly/Salary Rate		
Supervisor	Starting	Final	
Reason for Leaving	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>		

Explain any gaps in employment:

Describe any specialized training, apprenticeship, skills and extra-curricular activities.
Describe any job-related training received in the United States military.
List professional, trade, business or civic activities and offices held that may be relevant to this job.
ADDITIONAL INFORMATION: Other qualifications- summarize special job-related skills previously acquired.

SPECIALIZED SKILLS

Machinery previously operated	
Carpentry skills	
Welding experience	
Auto / diesel mechanic	
Microsoft Office	
Other	

<p>Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.</p>	
<p>Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

PROFESSIONAL REFERENCES *Do not include family members*

Name	Telephone	Occupation	Relationship

APPLICANT'S STATEMENT

Initial next to each statement

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date