

101 McCandless Lane Suite A Council Bluffs, IA 51503 Phone (402)332-8226 www.yoderconstructionbuild.com

Employment Application

Position Applied for:	Type of employment:		Date:			
	Full Time	Temporary	Part Time			
Name of Applicant (pleas	e indicate how y	ou wish to be a	iddressed):			
Last Name	First Name		Middle Initia	I		
Home Telephone #:	Cell Phone #:		Date of Birth	1:		
Current address:	•	City:	State:	Zip code:		
Previous address:		City:	State:	Zip code:		
Have you ever been						
convicted of a felony?	Yes	No				
Are you willing to						
relocate?	Yes	No				
Do you have a valid			License Number: State:			
driver's license?	Yes	No				
Are you able to obtain			Experation D	ate:		
a Commercial Driver's	Yes	No				
Liscense?						
Are you 18 years old						
or older	Yes	No				
Education				Did you obta	in either a	
Secondary School attended and location:		Highest grade completed:		diploma or GED:		
College/University atended and location:		Number of years:		Degrees:		
Major subjects of specialization:						
Other educational trainin	g/courses:					

Employment History (lis	t present or most	recent position	ns first)			
May we contact your cu	rrent employer?	Yes	No			
1. Name of Employer:		Address:		Phone #:		
Type of Business:		Department:		Your Position:		
Your duties:						
Name and Position of In	nmediate Supervi	sor:				
Hire date:	Date left:	Date left:		ry:		
Your reason for leaving:			Final Salary:			
2. Name of Employer:		Address:		Phone #:		
Type of Business:		Department:		Your Position:		
Your duties:		•				
Name and Position of In	nmediate Supervi	sor:				
Hire Date:	Date left:	Date left:		Starting salary:		
Your reason for leaving:		•		Final salary:		
3. Name of Employer:		Address:		Phone #:		
Type of Business:		Department:		Your Position:		
Your duties:		•				
Name and Position of In	nmediate Supervi	sor:				
Hire Date:	Date Left:	Date Left:		Starting Salary:		
Your reason for leaving:				Final Salary:		

References (Please provide at least 3 and do not list relatives or former employers)							
<u>Name</u>	Phone #	How do you know them					
		_					
Are you willing to have a background	l check?	•					
Are you willing to do a drug test?	Are you willing to do a drug test?						
Are you willing to take a personality profile test?							
Are you aware of any current injuries	s or issues you may	have that could affect your abiltiy to					
do the job that you are applying for?							
Yes	No						
If yes, please explain so that if possib	ble we can arrange	accommodations:					
Languages (spoken, written, read) no	ote fluency:						
For your information, Yoder Construc	ction Inc. is:						
Tabacco Free- Drug & Alcohol Free-P	rofanity Free- & Go	ossip Free:					
Only apply if you are ab	le to maintain this	working environment					
We appreciate your interest in seekir	ng employment wi	th us. Please feel free to make any					
additional remarks in the space provided below or attach any additional information that							
would be helpful in evaluating your qualifications.							
I hereby certify that to the best of my	y knowledge and b	elief the answers given by me to the					
foregoing questions and statements made by me in the application are correct.							
I consent to Yoder Construction Inc. t	to obtain such pers	sonal and job-related information as					
required in connection with this for e	employment.						
Signature of Applicant		Date					