

Application for Employment Pre-Employment Questionnaire

Equal Opportunity Employer

Date:

Griffin Masonry, Inc.

Personal Information								
Name (Last, First):				Social Security Number:				
Address:		City:		State:	Zip Code:			
Phone Number:	Referred	Referred by:						
	Email ad	Email address:						
Employment Desired								
Position:								
Brick Mason			Poured Walls					
Laborer			Truck Driver					
Concrete Finisher			Anyt	Anything				
Footings			Other:					
Start Date: Pay Rate Desired				Do you know how to drive a forklift?				
Do you have experience?	<u> </u>	yes	no		yes	n	0	
If you have construction expe	rience plea	ise check w	hich applies:	: C0	ommercial	r	esidential	
Have you ever worked for our company before?			yes _	yesno If yes, when?				
Are you employed?	yes	no	May we co	ontact your	employer? _	yes	no	
Employment History	(Please li	st below yo	ur last four e	mployers, s	tarting with	the last or	e first)	
Name & Phone Number of Employer		Date	Position	Position		Reason \	ou Left Job	
Have you ever filed a worke Have you ever plead guilty or be other than routine traffice violatives, on back of page state we guilty will not automatically displea of guilty will automatically	een convionations)? here, when squalify you disqualify	cted of any iy and nature u for employ you from e	misdemeanor 'esn of offense. (ment. Howe mployment, c	O The existen ver, the failu or if employe	ice of a conv ure to disclo	riction or p se a convi d employm	lea of ction or	
ALL PERS	ONS ARE	SUBJECT T	O PRE-EMPL	OYMENT DI	RUG TESTIN	G.		

IF YOU USE DRUGS, DO NOT APPLY.