



Date _____

Please Print Clearly

APPLICATION FOR EMPLOYMENT

Please answer ALL questions. Résumés are not a substitute for a completed Application.

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service-member status, race, color, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

Chestnut Building & Design utilizes E-Verify and employs only individuals who are legally eligible to work in the United States.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR THE EMPLOYEE MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.

Name _____ Position Desired _____ (list only one)

Telephone Number () _____ - _____ Alternate/Cell Number () _____ - _____

Present Address _____

Street, Apartment, or Unit Number

City _____ State _____ Zip _____

How long have you lived there ____ / ____ Year/Months Email Address (optional) _____

How were you referred to the Company? _____

Desired Salary/Hourly Rate _____

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States? Yes No

Type of employment desired? Full-time Part-time (Specify Hours) _____ Temp (Specify time-frame) _____

Are you willing to work weekends? Yes No Evenings? Yes No Overtime? Yes No

Date on which you can start work if hired _____

Have you previously applied for employment with this Company? Yes No

If Yes, when did you apply? _____

Have you ever been employed by this Company? Yes No

If Yes, provide dates of employment, location, and reason for separation from employment. _____

Do you have any friends, relatives, or acquaintances working for Chestnut Building & Design? Yes No

If yes, state name & relationship: _____

If applicable, below list any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of an assumed name, nickname, etc.

Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes No

If yes, please describe the crime—state nature of the crime(s), when and where convicted and disposition of the case:

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. Each instance and explanation will be considered in relation to the position for which you are applying.)

Education	School Name and Location (Address, City, State)	Course of Study	Graduate? Yes or No	# of Years Completed	Degree/Major
High School					
College					
Bus./Tech./Trade or Post College					
Military Service Branch	Skills/Duties	Related Details		# of Years of Service	Rank

Honors Received _____

ADDITIONAL INFORMATION

Do you speak, write, or understand any foreign language(s)? Yes No

If yes, describe which language(s) and how fluent you consider yourself to be: _____

Do you have any other experience, training, qualifications, or skills which you feel make you especially suited for working with us? Yes No

If yes, please explain: _____

WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with present or most recent employer listed first. Provide information for at least the most recent ten (10) year period. Attach additional sheets if needed. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment. Do not answer "see résumé."

Employer Name	Address	Type of Business
Telephone (____) _____ - _____	Dates Employed From ____ / ____ / ____	To ____ / ____ / ____
Job Title _____	Duties _____	
Supervisor's Name _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, why not? _____	
Wages Start _____ Final _____	Reason for Leaving _____	
What will this employer say was the reason your employment terminated? _____		
How much notice did you give when resigning? If none, explain. _____		

Employer Name	Address	Type of Business
Telephone (____) _____ - _____	Dates Employed From ____ / ____ / ____	To ____ / ____ / ____
Job Title _____	Duties _____	
Supervisor's Name _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, why not? _____	
Wages Start _____ Final _____	Reason for Leaving _____	
What will this employer say was the reason your employment terminated? _____		
How much notice did you give when resigning? If none, explain. _____		

Employer Name	Address	Type of Business
Telephone (____) _____ - _____	Dates Employed From ____ / ____ / ____	To ____ / ____ / ____
Job Title _____	Duties _____	
Supervisor's Name _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, why not? _____	
Wages Start _____ Final _____	Reason for Leaving _____	
What will this employer say was the reason your employment terminated? _____		
How much notice did you give when resigning? If none, explain. _____		

Employer Name _____	Address _____	Type of Business _____
Telephone (____) _____ - _____	Dates Employed From ____ / ____ / ____	To ____ / ____ / ____
Job Title _____	Duties _____	
Supervisor's Name _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, why not? _____	
Wages Start _____	Final _____	Reason for Leaving _____
What will this employer say was the reason your employment terminated? _____		
How much notice did you give when resigning? If none, explain. _____		

Employer Name _____	Address _____	Type of Business _____
Telephone (____) _____ - _____	Dates Employed From ____ / ____ / ____	To ____ / ____ / ____
Job Title _____	Duties _____	
Supervisor's Name _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, why not? _____	
Wages Start _____	Final _____	Reason for Leaving _____
What will this employer say was the reason your employment terminated? _____		
How much notice did you give when resigning? If none, explain. _____		

Additional sheet(s) attached No Yes _____ sheet(s)

Have you ever been terminated or asked to resign from any job? Yes No If Yes, how many times? ____

If you answered Yes, Please explain the circumstances of **each** occasion.

REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

NAME	POSITION	COMPANY	WORK RELATIONSHIP (i.e., supervisor, co-worker)	TELEPHONE

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact.

NAME	OCCUPATION	ADDRESS	TELEPHONE	NUMBER OF YEARS KNOWN

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid Arizona driver’s license, an acceptable driving record and personal automobile liability insurance in an amount equal to the minimum required by the state of Arizona.

I understand and agree that Chestnut Building & Design will obtain a Motor Vehicle Record upon hire and annually.

I understand that Chestnut Building & Design is a drug and/or alcohol free work place and that Drug and/or alcohol testing performed is consistent with applicable federal, state, and local law. If I am offered a conditional offer of employment, I understand that a pre-employment (post-offer) drug test is required.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement.

I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

I authorize Chestnut Building & Design or its agents to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation which may be permitted by federal, state and/or local law.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

DO NOT SIGN UNTIL YOU HAVE READ ALL OF THE INFORMATION CONTAINED IN THE APPLICATION.

Applicant Signature _____

Date ____ / ____ / ____