

STRUCTURAL MODULAR INNOVATIONS, LLC

EMPLOYMENT APPLICATION & PRE-EMPLOYMENT QUESTIONNAIRE

Date: ____/____/____

Name: _____
Last First Middle

Present Address: _____
Street City State Zip

Permanent Address: _____

Phone Number: (_____) _____ Are you 18 yrs. or older? Yes ☐ No ☐

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? Yes ☐ No ☐

Employment Desired: _____

Position: _____ Date You Can Start: ____/____/____ Desired Pay: ____/hr.

Are You Employed Now? Yes ☐ No ☐ If so, may we request information from your present employer?
Yes ☐ No ☐

Ever applied for work with this company before? Yes ☐ No ☐ When? _____

Referred By: _____

Education	Name & Location of School	Years Attended	Did You Graduate?	Course of Study
Grammar School				
High School				
College				
Other Schools				

Subjects of special study or research work: _____

Additional Skills: _____

Memberships & Activities (Civic, Athletic, Etc.) _____
(Exclude organizations, the names of which may indicate the race, creed, sex, age, marital status, color or nation of origin of its members)

U.S. Military?:
Years of Service: _____ Branch: _____ Present Membership in
National Guard / Reserves: _____ Rank: _____

WORK HISTORY
START WITH YOUR MOST RECENT EMPLOYMENT

Month & Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From: _____ To: _____				
From: _____ To: _____				
From: _____ To: _____				
From: _____ To: _____				
From: _____ To: _____				

Which of these jobs did you like the best?

What did you like most about this job?

REFERENCES: Give the names of three persons not related to you which you have known for at least one year.

Name	Phone Number	Business Name	Years Acquainted
1. _____	Phone No.: (____) _____		
2. _____	Phone No.: (____) _____		
3. _____	Phone No.: (____) _____		

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE AT ANY TIME AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED WITH OR WITHOUT NOTICE AND WITH OR WITHOUT CAUSE AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE OTHER THAN ITS PRESIDENT, AND ONLY THEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME OR MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.

Date: ____/____/____

SIGNATURE _____