APPLICATION for EMPLOYMENT

PLEASE DOWNLOAD THIS APPLICATION TO YOUR COMPUTER AND COMPLETE IN ADOBE ACROBAT BEFORE SUBMITTING



Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Company.

| Please Print | | | | |
|--|--------------------------------------|---------------------|---|----------|
| | | | Date of application | |
| | | | | |
| N. | | | | |
| NameLast | Time! | Middle | Social Security # | |
| Last | First | Middle | | |
| Address | | | Date of Birth | |
| | | | Butto of Birthi | |
| Street Talanhana#(| City State | | | |
| 1 elephone# () | Cen # () | E-Mail Address | | |
| Referral Source (How did you he | ar about us?) | | | |
| If you are under 18, and it is requ | ired can you furnish a work per | mit? ves no | | |
| | | | , | |
| ii iio, preuse enpium | | | | |
| Have you ever been employed he | re before?yesno If | yes, give dates and | supervisors | _ |
| A | | | | |
| Are you legally eligible for emplo | syment in this country?yes | no | | |
| Date available for work/_ | / | What is your | desired salary range? \$ | |
| Date available for work | | what is your | desired sarary range: \$\square\$ | |
| Type of employment desired: | Full-TimePart-Time | Temporary | Seasonal | |
| | | | | |
| Driver's license number if driving | g may be required in position for | which you are appl | yingState_ | |
| violation, rehabilitation and position app | lied for will be taken into account. | | ruch as date of the offense, seriousness and nature | e of the |
| Have you ever pled "guilty" or "r | | | | |
| If yes , please provide date(s) and | details | | | |
| | | | | |
| | | | | |
| EMPLOYMENT HISTORY Starting | | | | |
| Employer | Telephone # | <u> </u> | Dates employed: MoYr to Mo | |
| Street addressStarting job title | | | | |
| | | | May we contact for reference?yes | |
| Why did you leave? | | | | |
| Summarize the type of work performed at | | | | |
| What did you like most about your position | | | | |
| What were the things you liked least about | t the position? | | | |
| | | | | |
| | | | Dates employed: MoYr to Mo | |
| Street addressStarting job title | | | | |
| = = = | | | May we contact for reference?yes | |
| Why did you leave? | | | | |
| | | | | |
| | | | | |
| What were the things you liked least about | | | | |
| | | | | |
| | | | Dates employed: MoYr to Mo | |
| Street address | | | | |
| Starting job title | | | | |
| | | | May we contact for reference?yes | _nolater |
| Why did you leave? | | | | |
| Summarize the type of work performed a | | | | |
| What did you like most about your position. What were the things you liked least about | | | | |
| what were the things you like a least about | t the position: | | | |

| SKILLS AND QUALIFICATIONS Summarize any special training, skills, lice | nses and/or certifica | ntes that may assist you | in performing | g the position fo | or which you are | e applying: |
|---|---|---|---|---|---|--|
| Computer Skills (Check where appropriate Word Processing Spreadsheet Presentation | | Years: Years: | E-Mail Internet | | | |
| EDUCATIONAL BACKGROUND Starting with your most recent school atten | ded, provide the foll | lowing information: | | | | |
| School (include City/State) | Years Completed | Completed | GP | A/Class Rank | Major/Mi | nor |
| | | DiplomaGEDCertificationOther | | | | |
| REFERENCES List names and telephone numbers of three list three schools or personal references we Name | | | ated to you an | | ous supervisors | . If not applicable, Number of Years Known |
| | | | | | | |
| | | | | | | |
| APPLICANT STATEMENT I certify that all information I have provided in o I expressly authorize, without reservation, the er professional), employers, public agencies, licens this application, resume or job interview. I herel seeking, gathering and using truthful and non-de organizations for furnishing such information ab | nployer, its representa ing authorities and ed- by waive any and all ri famatory information | tives, employees or agent ucational institutions and lights and claims I may ha | s to contact and to otherwise ve ve regarding the | obtain information | on from all refere of all information ents, employees o | n provided by me in or representatives, for |
| I understand that this employer does not unlawfu any applicant from consideration for employmen | | | | | e purpose of limi | ting or eliminating |
| I understand that this application remains curren employment, | t for 90 days. At the c | onclusion of that time, if | I have not heard | l from the employ | er and still wish t | to be considered for |
| If I am hired, I understand that I am free to resig terminate my employment at any time, with or w agreement or contract for employment for any sl make any assurances to the contrary and that no signed by the employer's president. | rithout cause and with pecified period or defin | or without prior notice ex nite duration I understand | ccept as may be d that no superv | required by law. risor or representa | This application tive of the emplo | does not constitute an yer is authorized to |
| I also understand that if I am hired, I will be requimmigration laws require me to complete an I-9 | | of identity and legal author | orization to worl | k in the United St | ates of America a | and that federal |
| I understand that any information provided by m further consideration for employment, or (2) ma | | | | | | (1) eliminate me from |
| DO NOT SIGN UNTI | L YOU HAVI | E READ THE A | BOVE AP | PLICANT | STATEM | ENT. |
| I certify that I have read, fully u | nderstand and acc | ept all terms of the f | oregoing Ap | plicant Statem | ent. | |

Signature of Applicant_

_____ Date _____ / ____

WHITE OAK CONSTRUCTION, LLC LIST OF EXPERIENCE

Please complete the following:

Please select the choice that closest describes your experience:

| NO | SOME | MUCH | |
|-------------------|-------------------|--------------------|----------|
| EXPERIENCE | EXPERIENCE | EXPERIENCE | COMMENTS |
| (Would like | (Still need | (Minimal direction | |
| to learn) | direction) | needed) | |

| Supervision | |
|--------------------------------------|--|
| | |
| Survey/stakeout/building layout | |
| Equipment operation — list type | |
| Concrete slabs | |
| Concrete footings & foundations | |
| Concrete finishing | |
| Welding work | |
| Rough carpentry | |
| Layout walls | |
| Finish carpentry (trim work) | |
| Cabinet/countertop hanging | |
| Asphalt shingling | |
| Metal roofing | |
| Metal/vinyl soffit/fascia | |
| Metal/vinyl/Hardiboard siding | |
| Hang metal or wood doors | |
| Mount windows | |
| Steel stud framing | |
| Drywall finishing | |
| Acoustical ceiling tile work | |
| HVAC work | |
| Plumbing – journeyman or apprentice? | |
| Other skill? – please list | |
| | |
| Overall: | |
| Steel building erection | |
| Pole building erection | |
| Residential construction | |
| Commercial construction | |
| | |

WHITE OAK CONSTRUCTION, LLC 6307 BIRD DOG POINT TALLAHASSEE, FL 32309

Phone: 850-296-4325

Email: jason@whiteoakbuilder.com

| I, | | , hereby give | my permission | on to release information concerning mysel | f to |
|---|------------------|----------------------------|----------------------------------|---|------|
| White Oak Construinformation. | ction, LLC. and | d release the ref | erence giver from | om all liability associated with this | |
| Signature: | | | Date: | | |
| | | olete above dott | - | | |
| TO: | | (Company § | given as referer | nce) | |
| reference. Please as | nswer the follow | has applied wing questions | for employmer and return by n | nt with our company and has listed you as mail or email. Thank You. | a |
| Please rate: | Excellent | Good | Fair | Poor | |
| Performance | | | | | |
| Reliability Cooperation | | | | | |
| Quality of Work Attitude | | | | | |
| Would you rehire the indicate of the work | | Yes | No | | |
| Other Comments: | | | | | |
| Signature: | | | Date: | | |
| Title. | | | | | |