



PETER LAPIDUS CONSTRUCTION, INC.

Employment Application

| APPLICANT INFORMATION | | | |
|---|------------------------------|-----------------------------|---|
| Last Name | First | M.I. | Date |
| Street Address | | Apartment/Unit # | |
| City | State | ZIP | |
| Phone | E-mail Address | | |
| Date Available | Social Security No. | Desired Salary | |
| Position Applied for | | | |
| Are you a citizen of the United States? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Have you ever worked for this company? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If so, when? |
| Have you ever been convicted of a felony? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes, explain |

| EDUCATION | | | |
|-------------|----|--|--------|
| High School | | Address | |
| From | To | Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |
| College | | Address | |
| From | To | Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |
| Other | | Address | |
| From | To | Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |

| REFERENCES | |
|---|--------------|
| <i>Please list three professional references.</i> | |
| Full Name | Relationship |
| Company | Phone () |
| Address | |
| Full Name | Relationship |
| Company | Phone () |
| Address | |
| Full Name | Relationship |
| Company | Phone () |
| Address | |

PREVIOUS EMPLOYMENT

| | |
|---------|-----------|
| Company | Phone () |
|---------|-----------|

| | |
|---------|------------|
| Address | Supervisor |
|---------|------------|

| | | |
|-----------|--------------------|------------------|
| Job Title | Starting Salary \$ | Ending Salary \$ |
|-----------|--------------------|------------------|

| |
|------------------|
| Responsibilities |
|------------------|

| | | |
|------|----|--------------------|
| From | To | Reason for Leaving |
|------|----|--------------------|

| | | |
|--|------------------------------|-----------------------------|
| May we contact your previous supervisor for a reference? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|--|------------------------------|-----------------------------|

| | |
|---------|-----------|
| Company | Phone () |
|---------|-----------|

| | |
|---------|------------|
| Address | Supervisor |
|---------|------------|

| | | |
|-----------|--------------------|------------------|
| Job Title | Starting Salary \$ | Ending Salary \$ |
|-----------|--------------------|------------------|

| |
|------------------|
| Responsibilities |
|------------------|

| | | |
|------|----|--------------------|
| From | To | Reason for Leaving |
|------|----|--------------------|

| | | |
|--|------------------------------|-----------------------------|
| May we contact your previous supervisor for a reference? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|--|------------------------------|-----------------------------|

| | |
|---------|-----------|
| Company | Phone () |
|---------|-----------|

| | |
|---------|------------|
| Address | Supervisor |
|---------|------------|

| | | |
|-----------|--------------------|------------------|
| Job Title | Starting Salary \$ | Ending Salary \$ |
|-----------|--------------------|------------------|

| |
|------------------|
| Responsibilities |
|------------------|

| | | |
|------|----|--------------------|
| From | To | Reason for Leaving |
|------|----|--------------------|

| | | |
|--|------------------------------|-----------------------------|
| May we contact your previous supervisor for a reference? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|--|------------------------------|-----------------------------|

MILITARY SERVICE

| | | |
|--------|------|----|
| Branch | From | To |
|--------|------|----|

| | |
|-------------------|-------------------|
| Rank at Discharge | Type of Discharge |
|-------------------|-------------------|

| |
|----------------------------------|
| If other than honorable, explain |
|----------------------------------|

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.
 If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

Please mail or fax completed application
 to: Peter Lapidus Construction, Inc.
 P.O. Box 1262, Carpinteria, CA 93014
 Fax : (805) 745-5957