

**EMPLOYMENT APPLICATION
FOR
LIFEGUARD FIRE PROTECTION INC.**

PERSONAL:

NAME _____
Last First Middle

ADDRESS _____
Street City State Zip

PHONE NO. _____ **REFERRED BY** _____

Date You Can Start _____ Salary Desired _____

Are you employed now? _____ If so, may we inquire of your present employer? _____

EDUCATION & MILITARY

	Name and Location of School	Date Graduated
High School	_____	_____
College	_____	_____
Trade/ Business/ Corres. School	_____	_____

Military Service Yes ___ No ___ Branch _____ Date of Discharge _____

REFERENCES: Give below the names of three persons NOT related to you.

	Name	Address	Business	Years Known
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

FORMER EMPLOYERS: (List below in detail the last three, listing last job first.)

Date Month and Year	Name/Address/Phone of Employer	Salary	Position	Reason Left
From _____	_____	_____	_____	_____
To _____	_____	_____	_____	_____
From _____	_____	_____	_____	_____
To _____	_____	_____	_____	_____
From _____	_____	_____	_____	_____
To _____	_____	_____	_____	_____

Are you now or have you ever been employed within the construction industry in any position (including administrative positions)?

Yes _____ No _____

If yes, please define and detail your duties:

Are you able to travel as needed within the construction industry within a multi-state operation and to work on out-of-town or out-of-state job sites through completion of any project?

Yes _____ No _____

DATE OF LAST PHYSICAL _____

The following duties are required for this position:

- Heavy lifting
- Prolonged standing
- Overhead reaching
- Ladder climbing
- Working on scaffolding or lifts up to 40 feet in height.

Can you meet these requirements:

Yes _____ No _____

DRIVING RECORD:

DO YOU HAVE A CURRENT DRIVER'S LICENSE? Yes _____ No _____

LICENSE NUMBER: _____

Before we can hire you, we must verify with our insurance company that your driving record is clean and that you hold a current _____ STATE driver's license

NOTICE TO APPLICANTS

This Company does not require a pre-employment medical examination but does reserve the right to require drug testing and a medical examination after an offer of employment is made to an applicant. All offers of employment are conditioned upon the passing of a drug test for the purpose of detecting the illegal use of drugs. Also, if an employment offer is made, you will be asked to answer certain medical questions. Medical examinations and answers to medical inquiries will be maintained on separate forms and will be treated as confidential medical records. An applicant will not be excluded from employment unless they have medical conditions that prohibit their ability to perform the essential job functions of the position he or she desires with this Company. The Company will make reasonable accommodations to aid handicapped applicants or employees fulfill essential job functions. Written job descriptions are available and will be furnished to applicants upon request.

REPRESENTATIONS AND WAIVERS

Read the following conditions. If you have any questions regarding the conditions, you should ask for an explanation or clarification from the employment interviewer. Signify your understanding and specific acceptance of each condition by your signature in the space provided at the end of the conditions.

I hereby authorize the Company to investigate any and all statements contained in this application. I hereby consent to the company conducting any checks concerning my background which are deemed necessary, advisable, or helpful by the Company (except contacting my current employer, unless permission is granted above). I understand that if hired, I will receive a copy of the Company's rules and regulations and the Company's policies, including its drug policy. I will read and understand the rules, regulations, and policies; and I acknowledge that I will be required to abide by them. I understand that if hired, I will be required to submit to a drug test as part of this application procedure. I hereby consent to that drug test, agree to cooperate fully with that drug test, and waive any and all objections I might otherwise have to such drug testing. I understand that I may be required to submit to a medical examination, if I am advised of a favorable employment decision. I hereby consent to such medical examination and will fully cooperate with any required examination. **I understand and agree that if this application results in employment, my employment can be terminated with or without cause and with or without notice, at any time, at the option of either the Company or myself.** I understand that no manager or representative of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing. I understand that due to the cyclical nature of the construction industry that the Company is not in a position to employ field personnel on a permanent basis.

I certify and guarantee that all statements made on this application are true and complete to the best of my knowledge and without mental reservations. I understand that falsification of this application may result in my not being considered for employment or, in the event I become employed by the Company, in my dismissal.

Signature of Applicant

Date