







Which of The Anderson Construction Group companies are you applying for? Please select below:

FMPI OYMENT APPI ICATION

An Equal Opportunity Employer

Equal access to employment, programs, and services is available to all applicants. If you require reasonable accommodation to the application and/or interview process, please notify a representative of The Anderson Construction Group.

It is the intent of The Anderson Construction Group to comply with all state and federal requirements and to operate within the law in the implementation of all facets of Equal Employment Opportunity. In the recruitment, selection, training, promotion, termination or any other personnel action, there will be no discrimination on the basis of race, color, religion, age, sex (including pregnancy and childbirth), national origin, ancestry, disability, sexual orientation, marital status, military service, arrest or conviction record, use or non-use of lawful products off The Anderson Construction Groups premises, or any other areas covered under state or federal law; to the extent prohibited by law. Do not include information of that nature in the application. It is the intention of The Anderson Construction Group that all qualified applicants will be given equal opportunity and that selection decisions be based on job-related factors.

□ Bob Anderson Builders, Inc.□ Mertins Custom Woodworks, LLC.□ BAB Design Build, LLC.								
Last Name:	First Name:		Middle Initial:					
Street Address:	City:	State:	Zip Code:					
Phone:	Email:	Are you legally authorized to work in the U.S.? YES() NO()						
Position applying for:	Desired Hourly or Salary Rate:	Are you at least 18 years old? YES () NO ()						
If position requires vehicle operation, do you have a valid Driver's License? YES () NO () Number:	How did you hear about The Anderson Construction Group?	Date you are available for work:						
Have you ever been convicted of a felony? YES () NO () Do you have any pending criminal charges against you? YES () NO () If Yes to either question please explain: Information used only if relevant to position(s) you are applying for.								
Thiornation used only if relevant to position(s) you are арргупід тог.							

Education	School Name	Major	Graduated	Years Completed
High School			YES()NO()	
College			YES()NO()	
Vocational			YES()NO()	
Other			YES()NO()	
Other			YES()NO()	

EMPLOYMENT HISTORY (Please list most recent first)

Company Name:	Phone Number:	City:	State:	From: To:
Job Title:		Immediate Supervisor:	Pay Rate:	
Reason for Leaving:				
Your Position and Duties:				
Company Name:	Phone Number:	City:	State:	From: To:
Job Title:		Immediate Supervisor:	Pay Rate:	
Reason for Leaving:				
Your Position and Duties:				
Company Name:	Phone Number:	City:	State:	From: To:
Job Title:		Immediate Supervisor:	Pay Rate:	
Reason for Leaving:		<u> </u>		
Your Position and Duties:				
Please read the paragraphs bellottom of this page.	ow. If you agree to the co	onditions contained in the paragra	phs, sign on the signatu	ure line at the
knowledge. I understand that i Anderson Construction Group w agree that if hired, my employn without cause. I also understa	f I am employed, any fals vill not be held liable in ar nent will not be for any fix nd that any offer of empl s application will remain "c	ion provided by me in this applica se statements or omissions will learly respect if my employment is termed period of time and may be termoyment may be conditioned on that active" for 30 days and if I want to struction Group.	d to immediate dismiss minated for that reaso inated at any time with e results of a physical (al. I agree that The in. I understand and nout prior notice and examination and/or
without a prescription as requ Construction Group requires a being under the influence of dru policy and this authorization as representative of The Anderson	uired by The Anderson C post-offer pre-employme ugs or alcohol at work, or nd consent are in a langu construction Group, price	g for the presence of illegal drugs onstruction Group's drug/alcohol ont drug test and a drug/alcohol to following an on-the-job accident of uage I understand and I understand to signing below. I will hold all provide the results of the testing. This income	policy. I understand est whenever an emplo r injury. The Anderson C and that if I have quest carties concerned harm	that The Anderson byee is suspected of Construction Group's tions I should ask a alless for any alleged
education, and activities. I rele information. I understand that attendance records, job descrip	ease from all liability, any the employment informations, disciplinary actions	ruction Group to investigate my operson, company, corporation, schation may include, but is not limite and opinions regarding my suitabil and should be considered as such	nool, or government ago d to, performance evalo ity for employment. I re	ency supplying such uations and reports,
Signature		 Date		