

**MILLER CONSTRUCTION SERVICES, LLC**  
**APPLICATION FOR EMPLOYMENT**

Please mail or return completed application to:  
 823 Colorado St.  
 Goodland, KS 67735  
 (785) 899-5231

**ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.**

Name \_\_\_\_\_ Date \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 How long at current address \_\_\_\_\_ Social Security Number \_\_\_\_\_  
 Are you under age 18 ( )YES ( )NO  
 Position Sought: \_\_\_\_\_  
 How did you learn about the position? \_\_\_\_\_  
 On what date would you be available for work? \_\_\_\_\_ Desired Wage/Salary \_\_\_\_\_  
 Are you a U.S. citizen, or are you otherwise authorized to work in the U.S. without any restriction \_\_\_\_\_  
 Have you ever been convicted of a felony?( )Yes ( )No If yes, please describe circumstances: \_\_\_\_\_  
 \_\_\_\_\_  
 Have you ever been involuntarily terminated or asked to resign from any position of employment?( )Yes( )No  
 If yes, please describe circumstances: \_\_\_\_\_  
 If selected for employment, are you willing to submit to a pre-employment drug screening test? ( )Yes ( )No  
 Do you smoke?( )Yes ( )No  
 Do you speak English? ( )Yes ( )No Any other languages spoken? \_\_\_\_\_  
 Do you have a valid driver's license? ( )Yes ( )No List any accidents or citations in past five years \_\_\_\_\_  
 \_\_\_\_\_  
 What is your means of transportation to work? \_\_\_\_\_

**EDUCATION**

School Name	Location	Years Attended	Degree Received	Major

Other training, certifications, or licenses held: \_\_\_\_\_

List other information pertinent to the employment you are seeking: \_\_\_\_\_

\_\_\_\_\_

## EMPLOYMENT

Please list your work experience for the past five years beginning with your most recent job held. **Attached additional sheets, if necessary.**

1. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company: \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

2. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company: \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

3. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company: \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

4. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company: \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

## REFERENCES – LIST THE NAMES OF THREE PERSONS NOT RELATED TO YOU

Name	Address	Telephone

## BE SURE TO FILL OUT WORK EXPERIENCE FORM ATTACHED

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## WORK EXPERIENCE

Rate ability if mark yes – (1) Have some knowledge, (2) Can do with help, (3) Can do on own. Feel free to expand upon your experience.

	YES	NO
<b>GENERAL:</b>		
Read Blueprints		
Metal Building Erection		
Metal Roofing Installation		
Post Frame Building Erection		
Siding		
Soffit		
Asphalt Shingles		
Drywall Hanging		
Drywall Finishing		
VCT Tile Installation		
Ceramic Tile Installation		
Welding		
<b>EXPERIENCE WITH EQUIPMENT:</b>		
Skidsteer loader		
Loader		
Forklift		
Scissor lift		
Man lifts		
<b>FRAMING:</b>		
Floor layout		
Wall layout		
Roof layout		
<b>CEMENT:</b>		
Grade work		
Form work		
Finish work		
Run power trowel		
Curb & gutter finishing		
Saw cutting		
<b>PAINTING:</b>		
Roller		

