

Application for Employment

Last Name	First Name	N	Middle Initial
Present Address			
Phone Number (Home)	(Cell)		
Are you prevented from lawfully IMMIGRATION status?	becoming employed in t	his country becaus	se of VISA or
YE	S	NO	
Do you have a valid Drivers License?		YES	NO
Are you available to travel and w	YES	NO	
If hired, would you take to a Post	YES	NO	
Criminal History:			
Have you been convicted of a Fel	YES	NO	
Are you a registered sex offender?		YES	NO
If 'YES' explain:			
Desired Employment Position:			
Operator Pipe Layer		N	Management
Years of experience			
Salary Desired			

Certifications (circ	cle ones that apply):			
OSHA 10 HR	Competent Person Exc	avation	Confined Space Entry	CPR/First Aid
Flagging	Other certifications:			
Current / Previou	us Employment:			
List last three emp	ployers, starting with the mo	ost recent		
Name of Last Emp	ployer			
Address				
Start Date		End Date		
Phone Number		Weekly S	alary	
Name of Supervis	or			
Description of Wo	ork			
Reason for Leavin	ng			
Name of Last Emp	ployer			
Address				
Start Date	I	End Date		
Phone Number		Weekly S	alary	
Name of Supervis	or			
Description of Wo	ork			

Reason for Leaving _____

Name of Last E	Employer			
Address				
Start Date		End Date Weekly Salary		
Phone Number				
Name of Super	visor			
Description of	Work			
Reason for Lea	ving			
Are you emplo	yed now?		YES	NO
May we contact your current employer?			YES	NO
Have you work for Brent Scarbrough & Company before?		& Company before?	YES	NO
Military Servic	e Record:			
•		Discharge Date	/ Rank	
Diamen of Serv		Discharge Date		
References:				
Name	Address Phone Num		mber	Years Acquainted

Authorization:

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed; falsified statements on this application shall be grounds for dismissal.

I authorized investigations of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that may result from the utilization of such information.

I also understand and agree that no 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, unless it is in writing and signed by an authorized company representative.

Date	Signature
Dutc	Bignature
Date	Signature