



87 North Mission Drive  
Pueblo West, Colorado 81007  
(719) 647-0463

#### APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer - All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

**Position Applying for:** \_\_\_\_\_

#### PERSONAL INFORMATION:

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Mobile Phone # \_\_\_\_\_

Are you eligible to work in the United States?  Yes  No

Are you at least 18 years old?  Yes  No

Have you ever been terminated from employment or asked to resign by an employer?  Yes  No

If yes, please provide company name(s) and details: \_\_\_\_\_

---

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation?  Yes  No

Date you can start? \_\_\_\_\_ Hourly rate / Salary desired? \_\_\_\_\_

Are you currently employed?  Yes  No

Do you have reliable transportation?  Yes  No If not, how will you get to work? \_\_\_\_\_

Have you ever worked for Pate Construction Company Inc. before?  Y or  N If yes, when? \_\_\_\_\_

Do you know anyone who works for our company?  Yes  No If yes, who? \_\_\_\_\_

Do you have any special skills, experience and/or training that would enhance your ability to perform the job that you applied for? If yes, please explain. \_\_\_\_\_

---

EDUCATION	Name of school	Graduated	Degree	Major
High School			N/A	N/A
College or University				
Other				

**EMPLOYMENT HISTORY:** Most recent or current position first.

1. Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

2. Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

3. Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

4. Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

**REFERENCES: Two supervisors and one colleague or friend etc.**

Name	Phone and Email	Company	Relationship
1	-----		
2	-----		
3	-----		

**Please read carefully before signing.**

Pate Construction Company Inc. is an equal opportunity employer. Pate Construction Company Inc. does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, gender, sexual orientation, marital status, physical or mental disability or veteran's status.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Pate Construction Company Inc. to hire me. If I am hired, I understand that either Pate Construction Company Inc. or I can terminate my at-will employment at any time and for any reason, with or without cause and without prior notice.

Pre-employment drug testing – When the Company decides to hire an applicant, the applicant will be notified about the drug testing policy and asked to consent to drug tests in writing as a condition of employment. If the applicant returns a positive test result or refuses to consent, the Company will withdraw the offer.

I attest with my signature below that I have given true and accurate information on this application. I authorize Pate Construction Company Inc. to contact my references that I provided for employment reference checks. If any information I have provided is untrue, or if I have withheld information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature \_\_\_\_\_ Date \_\_\_\_\_