

# Employment Application



Program Management  
Design Build  
Construction Management

To Applicant:  
To be considered for employment, all items on pages 1 & 2 must be completed, including signature on back.  
  
PLEASE PRINT LEGIBLY IN INK

PAGE 1 (Applicant Completes)

Date: \_\_\_\_\_

Referred By: \_\_\_\_\_

Murray Company is an Equal Opportunity Employer who guarantees, pursuant to all applicable Federal State Laws, every applicant for employment and every employee equal consideration in all matters relating to employment without regard to race, color, sex, age, religion, national origin or disability.

## PERSONAL INFORMATION

Name: (Last, First, Middle)

Present Address: (Street Address)	(City)	(State & Zip)	Telephone number where you can be contacted: (Area code & number)
Permanent Address: (Street Address)	(City)	(State & Zip)	Are you 18 years or older? <input type="checkbox"/> Yes <input type="checkbox"/> No After hired, can you submit proof of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
Previous Address: (Street Address)	(City)	(State & Zip)	Drivers License State and No.
Only U.S. citizens or aliens who have a legal right to work in the U.S. are eligible for employment.		If hired, will you be able to provide proof that you have a legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been employed by Murray Company? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when, where, and what location?			

## EMPLOYMENT INTERESTS/SKILLS

Position for which you are applying:	Salary Expected:	Dated Available for Work:	Full Time <input type="checkbox"/>	Regular <input type="checkbox"/>
			Part Time <input type="checkbox"/>	Temporary <input type="checkbox"/>
Are you willing to relocate? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list which states you would prefer to live in: (maximum of four states) 1.                      2.                      3.                      4.			
Can you work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Can you work shifts? <input type="checkbox"/> Yes <input type="checkbox"/> No	First <input type="checkbox"/> (7:30am-3:30pm)	Second <input type="checkbox"/> (3:30pm-11:30pm)	Third <input type="checkbox"/> (11:30pm-7:30am)
Are you able to perform, in a reasonable and safe manner, all of the essential functions of the position for which you have applied? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain:				
<b>*Work schedules and locations vary with positions and will be explained by interviewer.</b>				

## SPECIALIZED SKILLS - Complete if applicable to the position for which you are applying.

Typing - wpm:	Dictation - wpm:	Office machines operated:
List all equipment you have operated:		
Other specialized skills or information you feel are pertinent to the job for which you are applying:		
Have you ever been discharged from a job? Explain		
Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe in full and give detail of conviction, offense, penalty assessed and disposition:**		

**\*\*Applicant need not disclose information contained in judicially sealed, expunged, or statutorially eradicated records. The existence of a conviction record is not an automatic bar to employment. Factors such as the nature and gravity of the offence, time passed since the conviction and/or completion of the sentence, age at the time of the offence, rehabilitation and the nature of the job sought will be taken into account.**

## EDUCATION

SCHOOL	LOCATION	HIGHEST GRADE	DIPLOMA/DEGREE TYPE ( <input type="checkbox"/> ) IF EARNED	COURSE/MAJOR
High School			( )	
College			( )	
Graduate			( )	
Business/Vocational			( )	
License/Certificates			Date Expires:	

## EMPLOYMENT HISTORY

Please list all jobs, beginning with your present or last employer. Account for all periods, including unemployment, self-employment, and military service. If space is insufficient, list on a separate page or additional application form.

1. Company Name & Address:		Job Title:		May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Type of Business:		Department:		Individual to contact for reference: (name and number)	
Annual Base Salary (List bonus separately)		Duties/Responsibilities:		Reason(s) for leaving:	
Beginning:	Current/End:	Beginning:	End:	Mo.	Year
Annual Bonus/Incentive: \$		Mo.	Year	Mo.	Year
2. Company Name & Address:		Job Title:		May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Type of Business:		Department:		Individual to contact for reference: (name and number)	
Annual Base Salary (List bonus separately)		Duties/Responsibilities:		Reason(s) for leaving:	
Beginning:	Current/End:	Beginning:	End:	Mo.	Year
Annual Bonus/Incentive: \$		Mo.	Year	Mo.	Year
3. Company Name & Address:		Job Title:		May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Type of Business:		Department:		Individual to contact for reference: (name and number)	
Annual Base Salary (List bonus separately)		Duties/Responsibilities:		Reason(s) for leaving:	
Beginning:	Current/End:	Beginning:	End:	Mo.	Year
Annual Bonus/Incentive: \$		Mo.	Year	Mo.	Year
4. Company Name & Address:		Job Title:		May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Type of Business:		Department:		Individual to contact for reference: (name and number)	
Annual Base Salary (List bonus separately)		Duties/Responsibilities:		Reason(s) for leaving:	
Beginning:	Current/End:	Beginning:	End:	Mo.	Year
Annual Bonus/Incentive: \$		Mo.	Year	Mo.	Year

Have you ever served in the U.S. armed forces?  Yes  No

**Notice of Drug Screen:** Murray Company is concerned with the health and safety of all its employees, as well as the safety of its clients and the general public. Therefore we require as one of the steps in the hiring process that all otherwise qualified applicants for employment consent and submit to a drug screen. The drug screen will require the applicant to provide hair sample's, urine and/or blood which will be tested for the presence of controlled substances, including, but not limited to marijuana, cocaine, phencyclidine, amphetamines, and opiates. A confirmed positive test result or the refusal to submit to a drug screen will disqualify an applicant from consideration for future employment and a conditionally-hired employee from continued employment.

(1) I certify this application was completed by me and the facts set forth in this application are true and correct. I agree you may investigate my statements. I understand and agree that falsification of information or giving misinformation on this application is cause for disqualification from consideration of employment or discharge from employment at any time it becomes known by Murray Company (the Company).

(2) I understand and agree that as a part of the Company's procedures for processing employment applications, an inquiry may be made which will provide applicable information concerning my past job performance, character, general reputation, and personal characteristics. I understand and agree the Company may inquire into my credit history and I authorize release of my credit history by my creditors, past or present, for this purpose. I authorize any agencies, companies, past employers, schools or persons named in this application or otherwise, to give any information regarding my employment, education, conviction records or character. I hereby release the Company and said agencies, companies, past employers, schools or persons from all liability and from any damage resulting from using this information.

(3) After I have received a conditional offer of employment, I further authorize any physician or hospital to give the Company all job related information concerning my present and past health history, waive all provisions of law forbidding disclosure of such information and release the Company and said physicians and hospitals from all liability from any damage resulting from the release of this information.

(4) I understand and agree my employment and, if employed, my continued employment is conditioned upon my participating in and clearing such background security examinations and/or investigations as may be deemed advisable by the Company. I agree to participate in such examinations and/or investigations when requested to do so by the Company. I agree the Company shall be held harmless and hereby release the Company from all liability that may arise in connection with any security examination and/or investigation in which I may be involved.

(5) I understand and agree that nothing in this employment application or in the granting of an interview creates an employment contract between the Company and myself for either employment or for the providing of any benefit. No promise regarding employment has been made to me. I understand no such promise or guarantee is binding upon the Company unless made by the Principals in writing prior to the date of this application.

(6) If an employment relationship is established, I understand my employment is terminable "at will", that I will have the right to terminate my employment at any time, and that the Company will retain a similar right to terminate my employment at any time, with or without cause and with or without notice.

(7) I understand and agree that as a part of its selection and hiring process, Murray Company may require drug testing. I also understand and agree if a confirmed positive test result indicates the presence of a controlled substance in my body, I will be disqualified from further hiring consideration. Alternately, I understand and agree that if drug screen results are received with a confirmed positive test result indicating the presence of a controlled substance in my body, I will be terminated. I hereby give my consent to Murray Company to administer drug testing procedures to me and to use the results in further determining my employability with the Company.

**Notice of MVR** - Murray Company also reserves the right to pull a Motor Vehicles Report.

Date: \_\_\_\_\_

Applicants Signature: \_\_\_\_\_