

Name of Employer Address City, State, Zip Phone #	Name of Supervisor May we contact? Y N	Employment dates	Pay or Salary
	List duties performed and job responsibilities		

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	Reason for Leaving (be specific)		
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Skills and Qualifications

Summarize any training, skills, licenses, certificates and/or characteristics of yourself that may qualify you as being able to perform functions for the position that you are applying.

Educational Background (if job related)

	Name & Location	Years completed	Did you graduate?	Course of Study
High School				
College				
Other (Trade School)				

It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from Faddis Concrete Products, if I have been employed.

I give Faddis Concrete Products the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability Faddis Concrete Products and its representatives for seeking such information, and all other persons, corporations, or organizations for furnishing such information.


Faddis Concrete Products is an Equal Opportunity Employer. Faddis Concrete Products does not discriminate in employment and no questions on this application are used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

Faddis Concrete Products is a "Drug-Free Workplace" and it is understood that all offers of employment are conditional. Faddis Concrete Products requires all eligible applicants to participate in a pre-employment drug-testing program. An applicant will not be processed further unless the eligible applicant agrees to participate in the test. Failure to complete, sign and date the Consent & Release Form will disqualify me from any consideration to employment.

This application is current for only 90 days. At the conclusion of this time, if I have not heard from Faddis Concrete Products and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that Faddis Concrete Products is an "Employer At-Will" and that just as I am free to resign at any time, Faddis Concrete Products reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of Faddis Concrete Products has the authority to make any assurance to the contrary.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of this person's need for an accommodation that would be required by the ADA.

Signature of Applicant  _____ Date _____
 Use last 4 digits of your SSN as your signature