Date of Application _____

Application for Employment

KALIN CONSTRUCTION CO., INC., 2663 Yore Avenue, Sodus, Michigan 49126 269-925-2746 <u>hkalin@kalininc.com</u> An Equal Opportunity Employer

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, non-job related disability, or any other protected group status.

Please complete the entire application and sign the Acknowledgment at the end of the application. If there is not enough space on this form to supply all the information necessary to answer a question or supply complete information, please attach additional pages. You may complete the application now or return the completed application at a later time. You may show this application to any person of your choice.

Applicant Name:				
First	Middle		Last	
Current Address:				
Street		City/State		Zip Code
Phone: ()		_		
Position applying for?				
Who referred you?				
Rate of pay expected?				
Have you worked for				
this company before?	Reason for leaving	?		
	To ear month/year			
Names of any relatives employed by this company:				

EDUCATION

	Name and Address	Did You Graduate?	Course of Study or Degree Conferred
High School			
College			
Other			

Are you presently attending school or do you plan to further your education? _____ If so, please specify courses being taken and time commitment: ______

What experiences, skills, or qualifications do you feel especially would qualify you for work with our organization?

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING: Are you able to perform, with or without accommodation, the functions of the job for which you have applied: Yes _____ No _____

Note: If you require an accommodation, you must notify us in writing within 182 days after the need for accommodation becomes known.

Have you ever been convicted of a crime, excluding routine traffic offenses? ______ If yes, describe in detail:

Are there any felony charges pending against you currently? _____ If yes, please describe: ______

Do you hold any professional licenses or certifications? _____ If yes, please list and describe: _____

Have you ever had a professional license or certification revoked or suspended?_____ If yes, please list and describe:

Are you currently under investigation by any agency or department concerning any licensure or certification matter? _	
If yes, please describe:	

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EMPLOYMENT HISTORY

Start with most recent; include yoι	ır <u>entire</u> employment hi	istory and military service;	attach additional pages, if necessary.
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Company Name, Address	Dates of Employment				Rate of Pay	
and Telephone (or Military			Position, Duties &			
Branch)	То	From	Supervisor	Reasons for Leaving	Starting	End

Are you currently employed? _____ May we contact your current employer? _____

Are you bound by a continuing confidentiality, patent or other restrictive agreement from your current or former employer? Yes _____ No ____ If yes, please explain. _____

PERSONAL REFERENCES

(not former employers or relatives)

Name and Occupation

Address

Telephone Number

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ACKNOWLEDGMENT

In the event of employment, I agree that either party may terminate the employment relationship, with or without cause, at any time, and I further agree that this arrangement may only be altered in writing and signed by the president of Kalin Construction. I agree that I shall be bound by the other rules, policies, regulations and terms and conditions of employment of the Company as they are from time to time changed, and no additional obligations can be imposed on the Company except those which have been acknowledged in writing, by the president or his designated representatives.

I agree that any action or suit against the Company, its agents or employees, arising out of my employment or termination of employment, including, but not limited to, claims arising under State and Federal law, but not Federal civil rights statutes containing a separate limitations period, must be brought within 180 days of the event giving rise to the claims or be forever barred unless the applicable statute of limitations period is shorter than 180 days in which case I will continue to be bound by that shorter limitations period. I waive any limitation periods to the contrary. I further agree that if I should bring any non-statutory action or claim arising out of my employment against the Company, in which the Company prevails, I will pay to the Company any and all such costs incurred by the Company in defense of said claims or actions, including attorney fees. I further agree that my employment is conditional until such time as the results of my post-offer physical (if such physical is required) are known.

Date_____

Signature _____