



**WOOD BROS., INC.**  
GENERAL ENGINEERING CONTRACTOR

Post Office Box 216 • 14147 18th Ave. Lemoore, CA 93245 • (559) 924-7715 (559) 924-4595 • License # 558257

**APPLICATION FOR EMPLOYMENT**

Position applied for \_\_\_\_\_ Salary Desired \_\_\_\_\_ Date \_\_\_\_\_  
 Name \_\_\_\_\_ Telephone# \_\_\_\_\_  
 Address \_\_\_\_\_  
 Social Security# \_\_\_\_\_ Driver's License # \_\_\_\_\_  
 Emergency Contact \_\_\_\_\_ Telephone # \_\_\_\_\_  
 Have you ever been employed here before? yes/no Date available for work \_\_\_\_\_  
 Are you legally eligible for employment in this country? yes/no Full-Time/Part-Time/Seasonal  
 Have you been convicted of a crime in the last seven (7) years? yes/no If yes, please explain

**EMPLOYMENT HISTORY**

From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
 Position \_\_\_\_\_ Address \_\_\_\_\_  
 Phone # \_\_\_\_\_ Contact \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_ HourlyRate/Salary \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
 Position \_\_\_\_\_ Address \_\_\_\_\_  
 Phone # \_\_\_\_\_ Contact \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_ Hourly Rate/Salary \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
 Position \_\_\_\_\_ Address \_\_\_\_\_  
 Phone # \_\_\_\_\_ Contact \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_ Hourly Rate/Salary \_\_\_\_\_

**SKILLS & QUALIFICATIONS** (List all equipment operated and summarize any training, skills, licenses, that may qualify you as being able to perform job-related functions in the position for which you are applying)

**EDUCATIONAL BACKGROUND**

High School \_\_\_\_\_ Graduated yes/no  
 College \_\_\_\_\_ Degree yes/no

**REFERENCES**

Name \_\_\_\_\_ Telephone# \_\_\_\_\_  
 Name \_\_\_\_\_ Telephone# \_\_\_\_\_

WOOD BROS., INC.  
PREEMPLOYMENT STATEMENT

(Please read carefully and sign the statement below)

I understand and agree that:

The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, résumé, or any other materials, or during any interviews, can be justification of refusal of employment, or if employed, termination from Wood Bros., Inc. (the "Company").

Any offer of employment I may receive from the Company is contingent upon my successful completion of the Company's total preemployment screening process, including the Company's receiving references that it considers satisfactory. The Company's regular, full time employees are required to take a medical examination after receiving an offer of employment, but before starting work. The Company will bear the expense and there will be no cost to the employees. The Company's offer of employment is contingent on a successful completion of the examination. I also agree, if employed, to submit to a medical examination at any time, if required by the Company's, as allowed by applicable state and federal law. I hereby consent to having the results of any postoffer preemployment or postemployment medical exams I may be required to take disclosed to the Company.

I understand that as a condition of employment, I may be required to undergo and successfully pass a screening for alcohol and/or drugs. I also understand and agree that, if employed, to submit to an alcohol or drug screening at any time, if required by the Company, as allowed by applicable state and federal law. I hereby consent to having the results of any such alcohol or drug screening I may be required to undergo disclosed to the Company.

I give the Company the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I authorize and request that all of my present and former employers, educational institutions and those individuals I have listed as personal references furnish information about my employment and academic records, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested information. I hereby release from liability the Company and its representatives for seeking, gathering and using such information.

In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of the Company and understand that my employment and compensation can be terminated with or without cause or notice, at any time, at the option of either the Company or myself, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I further understand that no manager or representative of the Company, other than an authorized officer, has any authority to enter into any agreement with me for employment for any specified period of time or to make any agreement with me for employment for any specified period of time or to make any agreement different from or contrary to the foregoing. I further understand that any such agreement, if made, shall not be enforceable unless it is in writing and signed by me or by one of the individuals designated above.

The Company does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

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

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_