

Superior Building Solutions Employment Application

Please complete the entire application.

1. Employer Information

Superior Building Solutions
1200 Wright St Ste 4
Marquette, MI 49855
906-250-5241

2. Applicant Information

Applicant Full Name: _____

Home Address: _____

City/State/Zip: _____

Number of Years at this Address: _____

Daytime Phone: _____ Evening Phone: _____

Social Security Number: _____

Driver's License (State/Number): _____

3. Job Position Applied For

Position: _____ Full or Part Time: _____

4. Salary Desired: \$_____ Per _____

5. Who referred you to our company? _____

6. Have you applied to our company previously? ____ Yes ____ No

7. Are you at least 18 years old? ____ Yes ____ No

8. Do you have a valid driver's license?

____ Yes ____ No (If No, please let us know how you will get to work below)

9. If you are offered employment, when would you be able to begin work?

10. If hired, are you able to submit proof that you are legally eligible for employment in the United States?

____ Yes ____ No

11. Applicant's skills: Please list any skills you think would be helpful

12. Applicant Employment History:

List your current or most recent employment first. Please list all jobs (including self-employment and military service) that you have held, beginning with the most recent, and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

***Employer Name:** _____

Supervisor Name: _____

Address: _____

City/State/Zip: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

***Employer Name:** _____

Supervisor Name: _____

Address: _____

City/State/Zip: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

13. References:

List any two non-relatives who would be willing to provide a reference for you.

***Name:** _____

Address: _____

City/State/Zip: _____

Telephone: _____ Relationship: _____

***Name:** _____

Address: _____

City/State/Zip: _____

Telephone: _____ **Relationship:** _____

14. Please provide any other information that you believe should be considered, including whether you are bound by an agreement with any current employer:

Certification

I certify that the information provided in this application is truthful and accurate. I understand that providing false or misleading information will be the basis for the rejection of my application or, if employment commences, immediate termination.

I authorize Superior Building Solutions to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment, education and qualifications.

If I am offered employment, I understand that I will be subject to a background check including but not limited to criminal, social media, and drug testing.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its CEO, the employment relationship will be "at-will". In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Superior Handyman Corporation, except in a specific written contract of employment signed on behalf of the operation by its CEO, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION, AND I UNDERSTAND AND AGREE TO ITS TERMS.

Applicant Signature

Date

Print Applicant Name