



P.O. Box 325, Harrodsburg, Kentucky 40330

NAME _____
LAST FIRST MIDDLE

ADDRESS _____
STREET CITY STATE ZIP

TELEPHONE _____ SOCIAL SECURITY NUMBER _____

Are you 18 Years or Older _____ Date Available for Work _____

Position Applied For _____ Full Time _____ Part Time _____

Special Experience, Skills or
Qualifications _____

School Name	Address	# of Years	Graduation Date
College	Address	# of Years	Graduation Date
Trade or Vocational School	Address	# of Years	Graduation Date

Have you ever been convicted of a felony (crime other than minor violation)? _____ Yes _____ No
If "YES" please explain (state, date, type of crime, place of occurrence and disposition).

Do you have a valid KY Driver's License? _____ Yes _____ No
Have you had any violations in the past five years? _____ Yes _____ No. If yes, explain.

Do you have reliable transportation? _____ Yes _____ No

NOTE: Conviction of a crime will not necessarily disqualify you from the job which you are applying. Factors such as age at time of offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

(859) 734-5353 Fax (859) 734-5354
E-Mail: teri@mercerconstructioninc.com OR bud@mercerconstructioninc.com

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH THE MOST RECENT.
Include military service assignments and voluntary activities. Exclude organization's names which indicate race, color, religion, sex, national origin or any other protected status, but be certain to list all jobs you have had.

EMPLOYER	DATE EMPLOYED FROM TO	WORK PERFORMED
ADDRESS		
JOB TITLE	HOURLY RATE/SALARY START FINAL	
SUPERVISOR		
REASON FOR LEAVING		
EMPLOYER	DATES EMPLOYED FROM TO	WORK PERFORMED
ADDRESS		
JOB TITLE	HOURLY RATE/SALARY START FINAL	
SUPERVISOR		
REASON FOR LEAVING		
EMPLOYER	DATES EMPLOYED FROM TO	WORK PERFORMED
ADDRESS		
JOB TITLE	HOURLY RATE/SALARY START FINAL	
SUPERVISOR		
REASON FOR LEAVING		
EMPLOYER	DATES EMPLOYED FROM TO	WORK PERFORMED
ADDRESS		
JOB TITLE	HOURLY RATE/SALARY START FINAL	
SUPERVISOR		
REASON FOR LEAVING		

Have you ever been disciplined or discharged from employment? ___ Yes ___ No

Have you ever been asked to resign from employment? ___ Yes ___ No

If yes to either answer, please give full description of the circumstances:

REFERENCES (NOT EMPLOYERS OR RELATIVES – AT LEAST THREE)

NAME	OCCUPATION	ADDRESS	TELEPHONE #