



Employment Application

Date: _____

First Name: _____ Last Name: _____ M. I.: _____

Social Security #: _____ - _____ - _____ E-mail Address: _____

Physical Street Address(Not P.O.): _____ Apartment Number: _____

City: _____ State: _____ County: _____ Zip: _____

Phone Number: (_____) _____ - _____ Cellular/Pager: (_____) _____ - _____

Are you *at least* 18 years old? YES NO Additional Contact Number: (_____) _____ - _____

If driving is an essential function of the position for which you will be applying, do you have a valid Drivers License? YES NO

Trade: _____ Skill Level: _____ Desired Hour Wage: \$ _____

Total years of experience: _____ Commercial: _____ Industrial: _____ Residential: _____

Special skills: _____

Special training: _____

Do you have a State or County Trades License? YES NO License Number: _____

Have you applied to *RAMS/RPG* previously? YES NO If yes, month: _____ year: _____

High School: _____ Subjects: _____ Graduate? YES NO

Trade/Business School: _____ Subjects: _____ Graduate? YES NO

College: _____ Subjects: _____ Graduate? YES NO

Have you ever been convicted, plead no contest, nolo contendere or entered pre-trial intervention for a felony? YES NO

If yes, explain: _____

(Answering "Yes" will not necessarily disqualify you from employment with RAMS/RPG.)

** Applications are considered active and valid for 30 days.*

For Internal Use Only ~ Do Not Write In This Area

Assigned: _____ Date: _____ / _____ / _____ Rate: \$ _____

Previous Employment History

Please complete the following section to account for a minimum of three years of your employment history.

Current/Former Employer (Start with most recent): _____

Start Date: _____ / _____ / _____ End Date: _____ / _____ / _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____ - _____ Supervisor: _____

Position: _____ Wage per hour: \$ _____ May we contact? YES NO

Reason for leaving: _____

Former Employer: _____

Start Date: _____ / _____ / _____ End Date: _____ / _____ / _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____ - _____ Supervisor: _____

Position: _____ Wage per hour: \$ _____

Reason for leaving: _____

Former Employer: _____

Start Date: _____ / _____ / _____ End Date: _____ / _____ / _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____ - _____ Supervisor: _____

Position: _____ Wage per hour: \$ _____

Reason for leaving: _____

Former Employer: _____

Start Date: _____ / _____ / _____ End Date: _____ / _____ / _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____ - _____ Supervisor: _____

Position: _____ Wage per hour: \$ _____

Reason for leaving: _____

How did you hear about us? (Check a Box)

Referral

Who were you referred by? (Please specify)

- RAMS Field Employee Name: _____
- RAMS Corporate/
Branch Employee Name: _____
- Jobsite What Jobsite: _____
- Another Company What Company: _____
- Other Who: _____

Indeed

I am a previous RAMS employee.

Text or Email Blast

Craigslist

ZipRecruiter

Direct Mail Post Card

Now Hiring Poster

Facebook

Ninja Gig

Miscellaneous Internet

Where: _____

Other: _____
