



# AOS APPLICATION

## CONTACT & BACKGROUND INFORMATION

Full Name:

Phone:

Email:

Address:

City:

State:

Zip:

If Applying for a position that requires operation of company vehicles, are you legally authorized to operate a company vehicle?

Yes

No

If applying for a field position, please verify you are able to lift up to 75lbs.

Yes

No

## EDUCATION

High School Name:

Diploma?

Yes

No

Other:

College Graduate?

Yes

No

I'm currently enrolled

Name and address of college:

Major Course of Study:

Degree Received:

## EMPLOYMENT HISTORY *(Last 2 Positions)*

### #1 Employment:

Previous Employer #1:

Position:

Address:

Reason For Leaving:

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Date Employed:

To:

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Supervisor's Name:

Phone:

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May We Contact?  Yes  No

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## #2 Employment:

Previous Employer #2:

Position:

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Address:

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Reason For Leaving:

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Date Employed:

To:

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---

Supervisor's Name:

Phone:

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May We Contact?  Yes  No

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## EXPERIENCE

Please List Equipment Experience:

Please List Construction Experience:

## REFERENCES

#1 Reference Name:

Phone:

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#2 Reference Name:

Phone:

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# PLEASE CAREFULLY READ THE FOLLOWING STATEMENTS:



**Authority to Release Information:** By my signature, I consent to the release of information to authorized officers, agents, and/or employees of AOS Specialty Contractors, Inc. which may include but not limited to information concerning my past and present work, including my official personnel record files, attendance records, evaluations, educational records including transcripts, military service, law enforcement records, and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of AOS Specialty Contractors, Inc. to make inquiries of third parties such as credit bureaus. I further release the organization, educational entity, present and former employers, law enforcement organizations, and all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment.

**Certification of Applicant:** By my signature, I affirm, agree, and understand that all statements on this form are true and accurate. Any misrepresentation, falsification, or material omission of information or data on this application may result in exclusion from further consideration or, if hired, termination of employment. If I have requested herein that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from such employer prior to beginning work. I understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time by my employer with or without cause and with or without notice. I also may terminate my own employment at any time with or without cause and with or without notice.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



# AOS

**SPECIALTY CONTRACTORS**