



# Application for Employment

Acadian Engineers & Environmental Consultants, Inc. is an Equal Opportunity Educational Institution and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications, and without regard to race, gender, religion, national or ethnic origin, disability, age, marital or veteran status, or sexual orientation. Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.")

Date of Application:	Position applying for:	<b>For Office Use Only</b>
Name (Last, First, Middle):	Nicknames:	
Street Address:	City, State & Zip:	
Social Security Number:	Home Phone:	Cell Phone: Other Phone:
Date available to work:	Desired Salary Range: \$	Email Address:
Are you eligible to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If NO, what is your current age?
Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, please explain:
Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, what is your current job title & department?
Have you ever been employed with us before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, dates of employment & reason for leaving:
Do any friends or relatives work here?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, their name & their relationship to you?
If required for position, do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, State of issuance, license #, and expiration date:
If required for position, can you travel if job requires it?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
How did you learn about Acadian Engineers? (Check all that apply):		
<input type="checkbox"/> Job Bulletin (Posting) /Walk-in	<input type="checkbox"/> Website	<input type="checkbox"/> Ad in newspaper <input type="checkbox"/> Ad in magazine
<input type="checkbox"/> Referral by employee	<input type="checkbox"/> Other	<input type="checkbox"/> Dept. of Labor

## EDUCATION

Name of School	City/State	Did you graduate?	If No, # of years left to graduate	If Yes, date of graduation	Degree received	Major
High School:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
GED:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Other:		<input type="checkbox"/> Yes <input type="checkbox"/> No				

**RELEVANT CREDENTIALS/LICENSES/PROFESSIONAL AFFILIATIONS**

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**SKILLS:** Please list technical skills, clerical skills, trade skills, specialized training, equipment operated, etc. Include relevant computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, or professional)


**WORK EXPERIENCE** - Please detail your entire work history. Begin with your current or most recent employer. If you held multiple positions with the same organization, detail each position separately. Attach additional sheets if necessary. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. **PLEASE DO NOT** - Complete this information with the notation "See Resume."

<b>Dates Employed</b> From: To:	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time	Title:
Starting Salary: \$	Organization Name and Address:	
Final Salary: \$		
Supervisor's Name and Phone #:	Other Reference Name, Title and Phone #:	May we contact employer: <input type="checkbox"/> Yes <input type="checkbox"/> No
Primary duties:		Reason for Leaving:
<b>Dates Employed</b> From: To:	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time	Title:
Starting Salary: \$	Organization Name and Address:	
Final Salary: \$		
Supervisor's Name and Phone #:	Other Reference Name, Title and Phone #:	May we contact employer: <input type="checkbox"/> Yes <input type="checkbox"/> No
Primary duties:		Reason for Leaving:



**ADDITIONAL INFORMATION/COMMENTS**

**PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.**

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize Acadian Engineers to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of Acadian Engineers serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If employed, I will be required to provide proof of citizenship or immigration status and I will be required to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. If employed on a regular basis, I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first SIX MONTHS of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

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

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