

EMPLOYMENT APPLICATION

Dominion Construction Group, LLC

680 A Industrial Road

Warrenton, VA 20186

Dominion Construction Group, LLC (“DCG”) is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, veteran status or any other status protected under local, state or federal laws.

(PLEASE PRINT IN INK)

Position(s) Applied For	Date of Application		
Last Name	First Name	Middle Name	
Address	City	State	Zip Code
Telephone Number		Social Security Number	
How Did You Hear About Us?			
<input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Employment Agency <input type="checkbox"/> Current Employee _____ <input type="checkbox"/> Other _____			

Are you legally eligible to work in the United States? *(Proof of eligibility will be required upon offer of employment)* YES NO

Are you over the age of 18 years? *(If no, you may be required to provide authorization)* YES NO

Have you ever applied to DCG before? *(If yes, please give date.)* _____ YES NO

Have you ever worked for DCG before? *(If yes, please give date.)* _____ YES NO

Have you ever been convicted of a felony or a misdemeanor? *(A conviction will not necessarily disqualify you.)* YES NO

If yes, please explain: _____

Is anyone related to you employed by DCG? YES NO

If yes, please give their name and relationship to you. _____ YES NO

What salary or rate of pay do you expect to receive if employed? _____ per _____

Have you ever been fired or asked to resign from a job? YES NO

If yes, please explain. _____

What date would you be available to work? _____

EDUCATION

	Name and Location of School	Course of Study or Major	# of Years Completed	Diploma/ Degree
Elementary				
High School				
College				
Graduate				
Vocational				

Describe any specialized training, apprenticeships, licenses or skills.

Have you received any job-related training in the United States Military? YES NO

Please give dates and explanation:

EMPLOYMENT HISTORY (Begin with current or most recent employer. Do not exclude any employment. Include any applicable temporary employment attach another sheet if necessary. Previous salaries or wages will not be used to determine compensation at DCG.)

Company Name	Employment Dates From To	Salary Start End	Name and Title of Supervisor
Address		\$ \$	
Phone	Describe your duties:		
Reason for leaving and explanation			

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Address		\$ \$	
Phone	Describe your duties:		
Reason for leaving and explanation			

Please provide any other information that you feel will help us in considering your application for employment.

REFERENCES (Please list three persons, who are not related to you or previous supervisors, who can provide professional references.)

Name	Phone Number	Relationship/Occupation	Years Known

APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION

PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by DCG (hereinafter referred to as "DCG") that such employment with DCG is at will, for no specified duration and may be terminated by either DCG or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of DCG or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of DCG except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of DCG.

In consideration for employment with DCG, if employed, I agree to conform to the rules, regulations, policies and procedures of DCG at all times and understand that such obedience is a condition of employment. I understand that due to the nature of DCG business, attendance and punctuality are considered essential requirements of every job at DCG and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with DCG, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employments tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all former employers, references, and any others who have information about me to provide such information to DCG and/or any of its representatives or agents and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

Signature

Date

DCG IS PROUD TO BE AN EQUAL OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW.