

WORK EXPERIENCE Please list your work experience for the past five years beginning with your most recent job held.			
Name of employer	Name of last supervisor	Employment dates	Pay or salary
City, State Phone number		From To	Start Final
Your last job title			
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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Scott Contracting is committed to employing only United States citizens and aliens who are authorized to work in the United States and does not unlawfully discriminate on the basis of citizenship or national origin.

Employment is "AT WILL." Any employment relationship with Scott Contracting is voluntary and there is no specified length of employment offered. Accordingly, either you or Scott Contracting can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law. Furthermore, I understand that an offer of employment is **NOT** to be construed as an employment contract.

I understand and agree that an offer of employment may be conditional upon successfully passing a pre-employment physical and/or drug screen. I understand and agree that Scott Contracting is a "Drug Free" workplace and conducts random testing for substance abuse, of which I will be subject. I understand and agree that Scott Contracting may conduct investigative background inquiries related to the driving record, financial history, criminal convictions, and/or reasons for termination of past employment.

I understand and agree that all information I have provided in the application and future hiring documents must be true and complete to the best of the my knowledge. Any false information or omission may disqualify me from further consideration or employment and may result in my dismissal if discovered at a later date.

In compliance with the Immigration Reform and Control Act of 1986, each new employee, as a condition of employment, must complete the Employment Eligibility Verification Form I-9 and present documentation establishing identity and employment eligibility.

I affirm the above statements.

Signature _____ Date _____