

Red Barn Contracting Appleton, WI 54915

Employment Application

Personal information

First name:	Last name:	
City, state, zip code:		
Phone number:		
Email address:		
Have you applied before?.		Yes No
	fore?	
Do you have transportation	n?	Yes No
If you're under 18, do you	have an employment certificate	? ☐ Yes ☐ No
Proof of citizenship?		Yes No
Convicted of a felony in th	e last 5 years?	Yes No
If yes, what's the nature of	the crime?	
Position and availability Position applying for: Craft	tsman	
, 0		
Δvailable start date:		
	e:	
Days of availability:	o	
☐ Monday	☐ Thursday	☐ Sunday
☐ Tuesday	☐ Friday	
☐ Wednesday	☐ Saturday	
Hours of availability (For re	equesting Part-time work, norma	al hours 8am-5pm):
Available for overtime?		□ Ves□ No

Education and experience

High School:
Address:
City, State, Zip:
Did you graduate?
Degree/diploma earned:
College/University:
Address:
City, state, zip:
Number of years completed:
Did you graduate?
Degree earned:
Military experience:
Branch:
Rank:
Total years in service:
Skills/duties:
Skills and qualifications:
Do you speak a foreign language?
Employment history
Currently employed? ☐ Yes ☐ No
Name of employer:
Name of supervisor:
Phone Number:
Address:
City, state, zip:
Dates of employment:
Salary/hourly rate of pay:
Position and duties:
Reason for leaving:

Name of employer:	
Name of supervisor:	
Phone number:	
Address:	
City, state, zip:	
Dates of employment:	
Salary/hourly rate of pay:	
Position and duties:	
Reason for leaving:	
Name of employer:	
Name of supervisor:	
Phone number:	
Address:	
City, state, zip:	
Dates of employment:	
Salary/hourly rate of pay:	
Reason for leaving:	
g.	
May we contact for references?	es No
References: List three people who can provide feedback on your wo performance in the last four years.	orkplace
First and last name:	
Phone number:	
Email address:	
Address:	
City, state, zip:	
Occupation:	
Number of years acquainted:	
First and last name:	
First and last name: Phone number:	
Phone number: Email address:	
Address:	
City, state, zip:	
Occupation:	
Number of years acquainted:	

First and last name:
Phone number:
Email address:
Address:
City, state, zip:
Occupation:
Number of years acquainted:
If asked, are you willing to consent to a background check? Yes No
Disclaimer
Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application fully completed in order for it to be considered.
I certify that the information provided in this application is true and complete. I acknowledge that false information is grounds for not hiring me or immediate termination. I authorize the verification of any information listed above.
Print Name:
Signature:
Date: