JAMES & ASSOCIATE BUILDERS														
PERSONAL	INFORMA	ΓΙΟΝ												
Name (Last, First, M	fiddle)					Drive	r License	#						
Street Address		S	State	te Zip			Telephone Number							
Are you over 21 year Have you been conv		NO fense within the	e past seven	years? (ex	cept	for m	inor traffi	c offens	es) If so,	plea	se explain	n:		
EMPLOYM	ENT INTED	ЕСТС												
Positing for which ye	Rate of pay desired						Date Available							
Certain positions wi	A. Do you have a valid driver's license? YES NO													
such position, answ driving record must	B. Have you ever involved as a driver in any vehicle accidents in the past 3 years YES NO										t 3 years?			
such a job, and it wil	C. Have you been cited for any traffic offenses in the past 3 years? If so, please explain:													
Other specialized sk	ills or information yo	ou feel are pertin	nent to the jo		Ť									
Emergency Contact		Telephone Number												
EMPLOYM				(Infor										
Please list ALL JOH unemployment, self-				ng with yo	ur pı	resent	or last er	nployer.	Accoun	t for	all time	periods,	, including	
1. Name and Addres		Date of Employ Start End					nt	Rate of Pay Start End						
Job Title Dept			Supervisor			May we o			ontact your Telephone Number					
Duties and Responsibilities				Type of business Re					eason for leaving					
2. Name and Addres		Start				f Employment End		Star	Rate of Pay Start End		i .			
Job Title	bb Title Dept			Supervisor			May emplo		ntact your Telephone Number					
Duties and Responsi		Type of business Re					ason for leaving							
3. Name and Address				1	Sta	Date of Emp Start En		nployme End			Rate of Pay Start End			
Job Title		Dept	Superviso	or	May we employer?			contact your Telephone Nur			Numbe	er		
Duties and Responsibilities			Type of busi			ness Rea			ason for leaving					
EDUCATIO	N							L						
	Name, City, State							Highest Grade Level, Di				Degree		
High School														
College, business														
vocational or other Training														
Training														
I certify the facts set forth sufficient cause for dismissi- release any and all former a required to complete the im-	al. I authorize Dynamica, I	LC to verify all state m any liability whats	ements containe oever in connec	d in this applic tion with the at	ation tempt	and to co	ontact school fy my past or	s, former e present en	mployers, ar	nd pres	ent employe	r, if any. I	authorize and	
If employed, I agree to conf	form to all Dynamica, LLC p	policies and procedur	res and recogniz	e that my empl	loymer	nt and co	mpensation of	can be term	inated, with	or witl	nout cause, a	and with on	e week notice.	
Applicant's Signature							Date							