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# PRE-EMPLOYMENT APPLICATION

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DATE: \_\_\_\_\_

**Drop off of Mail to:**  
**Employment Dept.**  
RQ Construction, Inc.  
3194 Lionshead Ave.  
Carlsbad, CA 92010  
Fax: (760) 631-8222

**Visit us online:**  
[www.rqconstruction.com](http://www.rqconstruction.com)

**E-Mail:**  
[careers@rqconstruction.com](mailto:careers@rqconstruction.com)



R.Q. Construction, Inc. is an equal employment/affirmative action employer. It is our policy to recruit and hire without regard to race, religion, sex, color, national origin, age, marital status, disability or veteran status.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. It is important that you fully and accurately complete this form yourself. Each question should be answered in a completed and accurate manner as no action can be taken on this application until all questions have been answered.

IDENTIFICATION	
LAST NAME	FIRST NAME MIDDLE NAME
STREET ADDRESS	
CITY, STATE, ZIP	
Email:	
List all other names by which you have been known:	
1. _____	2. _____
3. _____	4. _____

**POSITION FOR WHICH YOU ARE APPLYING:** \_\_\_\_\_

**How did you hear about RQ Construction?:** \_\_\_\_\_ **Referred by:** \_\_\_\_\_

Salary Desired: \$ \_\_\_\_\_ Date Available to Start: \_\_\_\_\_

**EMPLOYMENT DESIRED:**

Are you seeking  full-time  part-time  temporary  summer employment

Are you willing to work overtime? Yes  No

Are you willing to travel? Yes  No  Comments: \_\_\_\_\_

Have you ever applied to or worked for our company before? Yes  No

If you answered yes, state when and where you applied and/or worked.

Are you now, or do you expect to be, working at any other business or job?    Yes                       No

Are there any days or hours you would be unable or unwilling to work?    Yes                       No

If yes, please specify those days or hours you would be unable or unwilling to work:

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Would you be willing and able to report to work on time everyday on a regular and consistent basis? Yes  No

If no, please explain: \_\_\_\_\_

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**EDUCATION**

Last High School Attended	Location	Did you Graduate?    Yes    No If no, do you possess a GED or Equivalent? Yes    No
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**COLLEGE OR UNIVERSITY**

School/Location	Degree Earned?    Yes    No If no, semester units completed: _____ If no, quarter units completed: _____	Degree/Major
School/Location	Degree Earned?    Yes    No If no, semester units completed: _____ If no, quarter units completed: _____	Degree/Major
School/Location	Degree Earned?    Yes    No If no, semester units completed: _____ If no, quarter units completed: _____	Degree/Major

**VOCATIONAL, TECHINCAL, OR OTHER TRAINING**

School/Location	Subject	Degree/Certificate
School/Location	Subject	Degree/Certificate

Professional Organizations to which you currently belong and which are job-related:

**SKILLS**

Keyboarding WPM: _____ Years of Experience Word    _____                      Expedition    _____ Excel    _____                      Other    _____ Outlook    _____ Access    _____	Languages Spoken:  Speak    _____    Fluent    _____    Moderate    _____    Beginner    _____ Read    _____ Write    _____
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Certificates or special licenses:

Please list other skills you possess (i.e. production concrete, low-voltage electrical, etc.)

**JOB RELATED EMPLOYMENT – “SEE RESUME” IS UNACCEPTABLE**

Provide employment history which is reasonably related to (or which you feel qualifies you for) the position for which you are applying. You may attach additional sheets if necessary.

<b>1</b>	Employer's Name		Telephone
	Address		Employed (Month/Year) From _____ To _____
	Job title and duties		Reason for Leaving:  May we contact?    Yes    No
	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Salary at Leaving \$ _____ Per _____	Name of Supervisor:
<b>2</b>	Employer's Name		Telephone
	Address		Employed (Month/Year) From _____ To _____
	Job title and duties		Reason for Leaving:  May we contact?    Yes    No
	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Salary at Leaving \$ _____ Per _____	Name of Supervisor:
<b>3</b>	Employer's Name		Telephone
	Address		Employed (Month/Year) From _____ To _____
	Job title and duties		Reason for Leaving:  May we contact?    Yes    No
	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Salary at Leaving \$ _____ Per _____	Name of Supervisor:
<b>4</b>	Employer's Name		Telephone
	Address		Employed (Month/Year) From _____ To _____
	Job title and duties		Reason for Leaving:  May we contact?    Yes    No
	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Salary at Leaving \$ _____ Per _____	Name of Supervisor:

Do you have any commitment to another entity or person that might affect your employment with our company?

Yes     No

If yes, please describe fully: \_\_\_\_\_

If hired, would you have a reliable means of transportation to and from work?

Yes     No

Are you at least 18 years old?

Yes     No

(If under 18, hire is subject to verification that you are of minimum legal age.) If hired, can you present evidence of your U.S. citizenship or proof of legal right to live and work in this country?

Yes     No

**REFERENCE**

PROFESSIONAL REFERENCES: (List persons who can critically assess your work qualifications and job performance. These references may be contacted in addition to immediate and former supervisors.)

Name	Organization	Position	Telephone

**COMMENTS**

**Please describe, in your own words, why you believe you should be selected for this position**

**UNEMPLOYMENT HISTORY**

Please account for any time(s) you were not employed in the last 7 years after leaving school. You do not need to include periods of one month or less. (Note: attach additional pages if necessary.) You must account for all periods of unemployment.

Time Period: \_\_\_\_\_

Reason(s) Unemployed: \_\_\_\_\_

Time Period: \_\_\_\_\_

Reason(s) Unemployed: \_\_\_\_\_

**CRIMINAL HISTORY**

Have you ever been convicted of, or pled guilty or no contest to a felony or misdemeanor? YES\_\_\_\_ NO\_\_\_\_  
In answering this question, the following convictions do not require a "yes" response: (1) a marijuana related conviction that occurred more than two years ago, (2) an offense for which you were referred to, and participated in, a pre or post-trial diversion program, (3) a conviction that has been expunged, or (4) Any misdemeanor conviction for which probation has been successfully completed or otherwise discharged AND the case has been judicially dismissed pursuant to Penal Code section 1203.4. To qualify for omission under Penal Code section 1203.4, an individual must have taken an affirmative action to file a petition with a court to have the conviction set aside and been successful in that action.

If the answer to the question is "yes", please provide the following information: Date of conviction: \_\_\_\_\_ County and State of conviction \_\_\_\_\_ Offense convicted of \_\_\_\_\_  
Please note: An affirmative response to this question will not automatically result in your disqualification for employment.

**AFFIDAVIT**

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application form or during any interviews may be grounds for my immediate discharge.

I hereby authorize the company to contact any individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any case of action against these individuals for defamation, invasion of privacy or any other reason because of their statements.

I agree that, if I am employed, I will abide by the rules and regulations of the company. I understand that the taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody in the Company is authorized to enter any written or verbal employment contract with me and for any definite period of time without the express written consent of the President of the Company. I also understand that my employment is "at-will" and may be terminated by myself or by the company at any time for any reason or no reason at all, with or without prior notice.

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**AGREEMENT FOR ARBITRATION**

I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by the company, that all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the company, whether during or after that employment, will be submitted to binding arbitration. I agree that such arbitration will be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution, and there are no other agreements as to dispute resolution, either oral or written, further such arbitration proceeding shall be held in (San Diego, CA).

Initials \_\_\_\_\_

**AGREEMENT FOR AT-WILL EMPLOYMENT**

I understand and agree that if you employ me, in consideration of my employment, my employment will be AT-WILL, for no definite or determinable amount of time, and may, regardless of the date of payment of my wages or salary, be terminated at any time, for any reason or no reason at all, with or without prior notice. At the option of the company unless made in writing and signed by me and an authorized officer of the company. I promise that I have not relied, and will not rely, on any oral or written statement to the contrary. I understand and agree that this is the entire agreement between me and the company regarding the term of my employment and replaces any other oral or written agreement or understanding.

Initials \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Print Name \_\_\_\_\_

Equal Employment Opportunity Data  
**Voluntary Self-Identification**

The Equal Employment Opportunity Commission (EEOC) requires organizations with 100 or more employees to complete an EEO-1 report each year. The EEOC has recently announced several changes to the job categories and rearranged its race and ethnicity groupings. Therefore, we are asking employees to complete a new voluntary self-identification sheet below so that we can properly update our records according to these new report requirements.

Completion of this data is voluntary and will not affect your opportunity for employment or terms or conditions of employment. This form will be used for EEO-1 reporting purposes only and will be kept separate from all other personnel records only accessed by Human Resources Department. Please return completed forms to the Human Resources Department.

Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Sex:  **Male**

**Female**

Race/Ethnicity:

**Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

**White (Not Hispanic or Latino)** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**Black or African American (Not Hispanic or Latino)** - A person having origins in any of the black racial groups of Africa.

**Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

**Asian (Not Hispanic or Latino)** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

**American Indian or Alaska Native (Not Hispanic or Latino)** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

**Two or More Races (Not Hispanic or Latino)** - All persons who identify with more than one of the above five races.

To be completed by  
employer:  
EEO-1 Category:

- Executive/Sr Officials & Managers**
- First /Mid Officials & Managers**
- Professionals**
- Technicians**
- Sales Workers**

- Administrative Support**
- Craft Workers**
- Operatives**
- Laborers & Helpers**
- Service Workers**