

# APPLICATION FOR EMPLOYMENT

Smith Contractors, Inc.  
P.O. Box 480  
Lawrenceburg, KY 40342  
502-839-4196

<b>NAME:</b>		<b>DATE:</b>	
<b>ADDRESS:</b>			
<b>CITY:</b>		<b>STATE:</b>	<b>ZIP:</b>
<b>SOCIAL SECURITY #:</b>		<b>DATE OF BIRTH:</b>	
<b>HOME PHONE #:</b>		<b>CELL PHONE #:</b>	
<b>WORK EXPERIENCE:</b>			
*Please use reverse side to list more experience, if necessary.			
<b>EDUCATION:</b>			
<b>REFERENCES: (Please list three (3))</b>			
<b>Name</b>	<b>Address</b>		<b>Phone #</b>
1.			
2.			
3.			
<b>RACE:</b> <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Other			
<b>VETERANS STATUS:</b> Please Explain.			

**\*As a condition of employment with Smith Contractors, Inc., applicants must pass a drug screen. This drug screen is at the applicant's expense. The testing facility must verbally (502-839-4196) report the test results as well as mail a copy of the results to Smith Contractors, Inc., P.O. Box 480, Lawrenceburg, KY 40342. In order to be considered for employment, test results must be negative.**

**Please return the following forms to our office:**

- **Application**
- **Form W-4**
- **Employee Acknowledgement of Receipt**
- **Policy and Procedure on Drug and Alcohol Abuse**
- **Authorization Agreement Automatic Deposits Form**
- **Workplace Threats and Violence Policy**
- **Motor Vehicle Driver's Certification**
- **Driver's License**
- **Weapons Policy**
- **Authorization and Release to Obtain Information (Fair Credit Reporting Act)**
- **Waiver of Group Health Insurance Form ( Sign this form if you are not going to enroll on the Group Health Insurance). If interested in enrolling in our group health insurance – ask your superintendent to notify the office so a health insurance enrollment package can be sent to you for enrolling. **Must enroll within the thirty days of hire date to be eligible. After that, will have to wait for open enrollment in December.****

**You May Keep the following forms:**

- **Safety Books**
- **Policy/Procedure on Drug & Alcohol Abuse**
- **Salary Savings Plan Information**
- **Insurance Information**
- **EEO Policy**
- **Sexual Harassment**

**This application will be kept on file in our office for a period of two (2) years.**

**SMITH CONTRACTORS, INC. IS AN EQUAL EMPLOYMENT  
OPPORTUNITY EMPLOYER**