



## APPLICATION FOR EMPLOYMENT

4Sight Group, LLC. maintains a policy for the treating of all employees and applicants for employment without regard to race, color, creed, religion, ancestry, genetics, marital status, genera, veteran status, pregnancy, sexual orientation, national origin, age or disability, or any other characteristic protected by law in all employment decisions, including but not limited to recruiting, hiring, compensation, training, promotion, demotion, transfer, lay-off, termination and all other terms and conditions of employment. 4Sight Group, LLC. complies with the law regarding reasonable accommodation for disabled employees. Applicants requiring reasonable accommodation in order to participate in our hiring process are requested to contact the Director of Human Resources in order to arrange for such accommodation. **Please completely fill out this application. Failure to complete all sections may disqualify you from consideration for employment.**

PERSONAL INFORMATION (PLEASE PRINT)				
FULL NAME (Last, First, Middle)		OTHER NAMES USED		
PERMANENT ADDRESS (Street)		PHONE NUMBER (     )		
PERMANENT ADDRESS (City, State, Zip)		CELL NUMBER (     )		
ARE YOU AT LEAST 18 YEARS OLD? <input type="checkbox"/> YES <input type="checkbox"/> NO		EMAIL ADDRESS		
CRIMINAL HISTORY				
<p>HAVE YOU EVER BEEN CONVICTED OF A VIOLATION OF ANY LAW OR ORDINANCE OTHER THAN A TRAFFIC VIOLATION? (Arrests are not convictions; do not include convictions that have been sealed, expunged or set aside.)</p> <p><b>California Applicants Only:</b> Omit any convictions for the possession of Marijuana that are more than (2) years old (except for possession of concentrated cannabis)</p> <p>Applicants also should omit any information concerning a referral to, and participation in, any pre-trial or post-trial diversion program.</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <i>If yes, describe incident, city, state, charge. Include any plea of "Guilty" or "No Contest", including any arrangement of deferred adjudication, sentence or judgments.</i> _____</p> <p>_____</p> <p>_____</p> <p>Answering yes to this question will not necessarily disqualify an applicant for employment.</p>				
E-VERIFY				
<p>4Sight Group, LLC will provide the Social Security Administration (SSA) and the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.</p>				
EMPLOYMENT OPPORTUNITY INFORMATION				
<p>All applicants offered a position as a Commercial Tradesperson, Laborer, Painter, Asbestos Worker/Supervisor, Skilled Laborer, Commercial Tradesperson – Drywall Finisher, Residential Skilled Tradesperson, HVAC Installer, Working Commercial Superintendent, and Working Superintendent will be required to complete a Physical Demands Analysis prior to employment.</p>				
POSITION APPLIED FOR		PROPERTY NAME		DATE AVAILABLE
PAY EXPECTED		SHIFT PREFERENCE <input type="checkbox"/> DAY <input type="checkbox"/> SWING <input type="checkbox"/> NIGHT		
ARE YOU APPLYING FOR		<input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> SEASONAL <input type="checkbox"/> TEMPORARY		HOW DID YOU HEAR ABOUT THIS POSITION?
HAVE YOU EVER BEEN EMPLOYED BY 4SIGHT GROUP, LLC? <input type="checkbox"/> YES <input type="checkbox"/> NO				
IF 'YES' INDICATE:	POSITION	PROPERTY/LOCATION	DATES WORKED	REASON FOR LEAVING
ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION FOR WHICH YOU ARE APPLYING EITHER WITH OR WITHOUT REASONABLE ACCOMMODATIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO				
ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(All new hires will be required to provide proof of eligibility to work in the United States)</i>				
FOREIGN LANGUAGES SPOKEN/WRITTEN				



**DRIVING HISTORY**

DO YOU HAVE A VALID DRIVERS LICENSE?  YES  NO DO YOU HAVE RELIABLE TRANSPORTATION?  YES  NO

HAVE YOU BEEN CONVICTED OF ANY MOVING VIOLATIONS IN THE LAST THREE (3) YEARS? (A moving violation includes, but not limited to, a speeding ticket, even one that has been paid)  YES  NO

HAVE YOU EVER BEEN INVOLVED IN ANY MOTOR VEHICLE ACCIDENTS WHILE DRIVING DURING THE PAST THREE (3) YEARS?  YES  NO If YES, please explain: \_\_\_\_\_

DO YOU HAVE ANY RESTRICTIONS ON YOUR DRIVER'S LICENSE AT PRESENT?  YES  NO If YES, please explain: \_\_\_\_\_

**EMPLOYMENT HISTORY** (List below current and last two employers, starting with the most recent one first. Please include any non-paid/volunteer experience which is related to the job for which you are applying.) Please complete even if you are attaching a resume.

COMPANY NAME	SUPERVISOR	DATES (FROM-TO)	JOB TITLE
CITY/STATE	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	PHONE NUMBER ( )	PAY RATE \$ <input type="checkbox"/> annually <input type="checkbox"/> hourly
DESCRIBE YOUR DUTIES		REASON FOR LEAVING	

COMPANY NAME	SUPERVISOR	DATES (FROM-TO)	JOB TITLE
CITY/STATE	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	PHONE NUMBER ( )	PAY RATE \$ <input type="checkbox"/> annually <input type="checkbox"/> hourly
DESCRIBE YOUR DUTIES		REASON FOR LEAVING	

COMPANY NAME	SUPERVISOR	DATES (FROM-TO)	JOB TITLE
CITY/STATE	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	PHONE NUMBER ( )	PAY RATE \$ <input type="checkbox"/> annually <input type="checkbox"/> hourly
DESCRIBE YOUR DUTIES		REASON FOR LEAVING	

HAVE YOU EVER BEEN TERMINATED OR ASKED TO RESIGN FROM ANY JOB?  YES  NO If YES, please explain: \_\_\_\_\_

**REFERENCES** (List three references who are NOT relatives. Do not duplicate persons listed above)

NAME	PHONE	RELATIONSHIP TO YOU

**EDUCATIONAL HISTORY**

EDUCATION	NAME OF SCHOOL, CITY/STATE	COURSE OF STUDY	NO. OF YEARS	LIST DEGREE / DIPLOMA RECEIVED	NAME USED DURING ATTENDANCE
HIGH SCHOOL					
TRADE SCHOOL					
BUSINESS SCHOOL					
COLLEGE/ UNIVERSITY					

LIST ANY OFFICE, CERTIFICATIONS, CLERICAL, COMPUTER SKILLS, OR OTHER SKILLS RELATED TO THE POSITION YOU ARE APPLYING FOR:



**APPLICANT STATEMENT (Please read carefully, initial each paragraph, and sign below.)**

\_\_\_\_ I hereby certify that the information contained in this application is true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any misrepresentation, falsification or omission of information on this applicant or any document used to secure employment shall be grounds for rejection of this application or immediate discharge if I am employed; regardless of the time elapsed before discovery.

\_\_\_\_ I hereby authorize, without reservation, 4Sight Group, LLC to thoroughly investigate the information on my application, my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to 4Sight Group, LLC. all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release 4Sight Group, LLC my former employers and all other persons or entities from any and all claims, demands or liability arising out of or in any way related to such investigation or disclosures.

\_\_\_\_ I understand that 4Sight Group, LLC adheres to a policy of AT-WILL employment which means that each employee and the Company each retain the right to terminate the employment relationship and that the Company retains the right to modify an employee's positions or compensation at any time, with or without cause or notice. No one other than the President of 4Sight Group, LLC has the authority to make any binding promise or enter into any agreement inconsistent with 4Sight Group's at-will policy and any such agreement must be in writing and signed by both the employee and the President of 4Sight Group, LLC to be effective.

\_\_\_\_ I understand that if I am extended an offer of employment by 4Sight Group, LLC, my employment is contingent upon satisfactory completion of a medical examination, including a drug test, and submission of proof that I have the credentials and/or licenses (if relevant) necessary for the position that I am offered.

\_\_\_\_ If hired, I agree to conform to 4Sight Group's policies and expectations, and I understand that these policies and/or employee handbook do not form a contract of employment, either express or implied.

\_\_\_\_ I understand that this application is only valid for the position applied for at present and that 4Sight Group, LLC. is not obligated to retain or consider this application for future openings.

\_\_\_\_ I also understand that, if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States as required by federal immigrations laws.

**I HAVE CAREFULLY READ, UNDERSTAND AND AGREE TO THE ABOVE**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date