



FARR CONSTRUCTION CORP. dba RESOURCE DEVELOPMENT COMPANY

1050 Linda Way - Sparks, NV 89431

Phone (775) 356-8004

APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

In an effort to provide a safe, efficient and productive work environment, Resource Development Company requires applicants as a condition of employment to:

1. Pass a pre-placement drug test.
2. Possess a valid NV driver's license and Social Security card
3. Meet the requirements to drive a company vehicle.
4. Have reliable personal transportation.
5. Possess a valid DOL OSHA 10-30 hour Construction Card.
6. Possess an updated DOT medical card.

PERSONAL	Last name		First	Middle	Date
	Street Address				Home Telephone ()
	City, State, Zip				Business Telephone ()
	Have you ever applied for employment with us? Yes No Month and year Location				Social Security #
	Position Desired				Pay expected
	Apart from absence for religious observation, are you available for full-time work? Yes No If not, what hours can you work?				Will you work overtime if asked? Yes No
	Are you legally eligible for employment in the United States?				When will you be available to begin work?
	Other special training or skills (languages, equipment operation, etc.)				

EDUCATION	School	Name and Location of School	Course of Study	Years Completed	Did you Graduate?	Degree or Diploma
	Graduate					
	College					
	Business/Trade/ Technical					
	High School					
	Elementary					

Membership in Professional or Civic Organizations (Exclude those which may disclose your race, color, religion or national origin)	



EMPLOYMENT		Please give accurate full-time and part-time employment record. Start with your most recent employer.
1	Company Name	Telephone ()
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Reason for leaving
	State Job Title and Describe Your Work	

2	Company Name	Telephone ()
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Reason for leaving
	State Job Title and Describe Your Work	

3	Company Name	Telephone ()
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Reason for leaving
	State Job Title and Describe Your Work	

4	Company Name	Telephone ()
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Reason for leaving
	State Job Title and Describe Your Work	

We may contact the employers listed above unless you indicate those you do not want us to contact.	DO NOT CONTACT
	Employer Number(s) Reason

MILITARY	Did you serve in the U.S. Armed Forces? Yes No	If "Yes," in what Branch? Dates
Describe any training received relevant to the position for which you are applying.		



RESOURCE DEVELOPMENT COMPANY

DO NOT ANSWER ANY QUESTION IN THIS SECTION UNLESS THE BOX IS CHECKED

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If the employer has checked the box next to the question, the information requested is needed for a legally permissible reason, including, without limitation, national security considerations, a legitimate occupational qualification or business necessity. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, or national origin. Federal law also prohibits discrimination based on age, citizenship and disability. The laws of most States also prohibit some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status and sexual preference.

x	Provide dates you attended school:	Elementary From _____ To _____	Number of dependents, including yourself x _____
	High School From _____ To _____	College From _____ To _____	Are you a Vietnam veteran? x _____ Yes _____ No
	Other (give name and dates)		Sex x _____ Male _____ Female
x	Marital Status _____ Single _____ Engaged _____ Married _____ Separated _____ Divorced _____ Widowed		Date of Marriage _____
			Are you a U.S. Citizen? x _____ Yes _____ No
	What was your previous address? _____		How long at present address? x _____ Years
			How long at previous address? _____ Years
	Have you ever been bonded? _____ Yes _____ No If "Yes," with what employers? _____		Are you over 18 years of age? ___Yes___No x If not, employment is subject to verification of age.
x	State names of relatives and friends working for us, other than your spouse. _____		

S I G N A T U R E	The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.	
	I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.	
	If you decide to engage an investigation consumer reporting agency to report on my credit and personal history I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.	
	_____	_____
	Date	Signature