

# Employment Application Form



**PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE**

**Please mail completed application to:**  
 189 S Orange Ave Suite 1550-S  
 Orlando, FL 32801  
**or fax/email application to:**  
 407-248-8124  
[info@jordancompanies.com](mailto:info@jordancompanies.com)

**OFFICE USE ONLY:**  
 Date received:  
 Reviewed by:

**PLEASE COMPLETE PAGES 1-5.**

DATE \_\_\_\_\_

Name \_\_\_\_\_  
Last                      First                      Middle                      Maiden

Present address \_\_\_\_\_  
Number                      Street                      City                      State                      Zip

How long at current address? \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

Are you under age 18 \_\_\_\_ YES \_\_\_\_ NO, if "YES", can you provide proof of your eligibility to work? \_\_\_\_ YES \_\_\_\_ NO

Are you currently authorized to work in the United States? \_\_\_\_ YES \_\_\_\_ NO. Proof of eligibility will be required if hired.

Position applied for (1) \_\_\_\_\_  
 and wage desired (2) \_\_\_\_\_  
 (Be specific)

Days/hours available to work  
 No Pref \_\_\_\_\_ Thur \_\_\_\_\_  
 Mon \_\_\_\_\_ Fri \_\_\_\_\_  
 Tue \_\_\_\_\_ Sat \_\_\_\_\_  
 Wed \_\_\_\_\_ Sun \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_

Employment desired     FULL-TIME ONLY     PART-TIME ONLY     FULL- OR PART-TIME

When are you available to start work? \_\_\_\_\_

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

Have you ever been convicted of a crime which is substantially related to the functions or qualifications of the job for which you are applying?  No     Yes    (a Conviction record will not necessarily disqualify you from employment).

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed and type(s) of rehabilitation. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PLEASE PRINT ALL  
INFORMATION REQUESTED  
EXCEPT SIGNATURE



APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE?  Yes  No

What is your means of transportation to work? \_\_\_\_\_

Driver's license number \_\_\_\_\_ State of issue \_\_\_\_\_  Operator  Commercial (CDL)  Chauffeur  
Expiration date \_\_\_\_\_

Have you had any accidents during the past three years? How many? \_\_\_\_\_

Have you had any moving violations during the past three years? How Many? \_\_\_\_\_

OFFICE  
POSITIONS ONLY

Typing  Yes  No \_\_\_\_\_ WPM  
10-key  Yes  No \_\_\_\_\_ WPM  
Word Processing  Yes  No \_\_\_\_\_ WPM  
Personal Computer  Yes  No PC  Mac  Other \_\_\_\_\_  
Skills \_\_\_\_\_

Please list two references other than relatives.

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Address _____	Address _____
_____	_____
Telephone ( ) _____	Telephone ( ) _____

Please use this space to elaborate on any background, experience, or qualifications that you believe should be considered in evaluating your qualifications for employment. You may include hobbies, volunteer experience and any other activities you believe relevant. Please omit any information that would disclose your race, gender, age, marital status, ethnic origin, religious or political affiliations, or disability.

PLEASE PRINT ALL  
INFORMATION REQUESTED  
EXCEPT SIGNATURE



APPLICATION FOR EMPLOYMENT

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES?  Yes  No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?  Yes  No

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

Work Experience Please list your work experience for the past seven years beginning with your most recent job held.  
If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your Last Job Title		

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact your present employer?  Yes  No

PLEASE PRINT ALL  
INFORMATION REQUESTED  
EXCEPT SIGNATURE



---

PLEASE READ CAREFULLY

---

**APPLICATION FORM WAIVER**

**As indication that you have read and understood each sentence, please write your initials in the spaces provided below.**

In exchange for the consideration of my job application by Jordan Brothers Construction, LLC., Jordan & Associates Consulting, Inc., and/or Jordan Engineering Group, LLC (hereinafter called "JORDAN"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist from time to time, or other JORDAN practices, shall serve to create an actual or implied contract of employment,\_\_\_\_ or to confer any right to remain an employee with JORDAN \_\_\_\_, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned,\_\_\_\_ and that relationship cannot be altered except by a written instrument signed by the Owner/Managing Member of the Company.\_\_\_\_ Both the undersigned and JORDAN may end the employment relationship at any time, without specified notice or reason.\_\_\_\_ If employed, I understand that JORDAN may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.\_\_\_\_

I authorize investigation of all statements contained in this application.\_\_\_\_ I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice.\_\_\_\_ I hereby give JORDAN permission to contact schools, all previous employers (unless otherwise indicated), references and others and hereby release JORDAN from any liability as a result of such contact.\_\_\_\_

I understand that JORDAN is a drug free workplace, and will submit to the drug testing requirements.\_\_\_\_

I understand that, in connection with the routine processing of your employment application, JORDAN may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living.\_\_\_\_ Upon written request from me, JORDAN, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.\_\_\_\_

I further understand that my employment with JORDAN shall be probationary for a period of ninety (90) days and further that at any time during the probationary period or thereafter, my employment relationship with JORDAN is terminable at will for any reason by either party.\_\_\_\_

**Signature of applicant** \_\_\_\_\_ **Date:** \_\_\_\_\_

---

JORDAN. is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with JORDAN depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

**\*\*Jordan Brothers Construction, LLC, Jordan & Associates Consulting, Inc., and Jordan Engineering Group LLC, is a Drug Free Workplace\*\***



## Disclosure to Employment Applicant Regarding Procurement of A Consumer Report

In connection with your application for employment, Jordan Brothers Construction, LLC, Jordan & Associates Consulting, Inc. and/or Jordan Engineering Group, LLC. (JORDAN) may obtain a consumer report on you as part of our process of considering you for employment. These reports may include public record information such as your driving record, criminal history, social security verification and address history. Private information such as credit history may also be obtained.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will be given a summary of these rights.

### **Applicant's Authorization and Release**

I hereby authorize JORDAN to obtain consumer reports about me as described above for the purpose of qualifying me for employment, and I release JORDAN, as well as Florida MVR Services, Inc. and all other entities from which the consumer reports are obtained from any claim or liability related to obtaining, compiling or releasing such reports. I also agree that this authorization and release will remain on file for the term of my employment and will serve as an ongoing authorization to obtain consumer reports related to my employment.

---

Applicant's Name

---

Signature

---

Social Security Number

---

Driver License Number – State

Driver License     ID Only

---

Date