



Pierre Construction Group, Inc.

PLEASE NOTE:

THIS IS A PRINTABLE APPLICATION ONLY.

APPLICANTS MUST STILL COME TO OUR
LOCATION TO COMPLETE THE
APPLICATION PROCESS.

**WE ACCEPT APPLICATIONS MONDAY THROUGH FRIDAY
BETWEEN 8:00AM AND 11:00AM OR 2:00PM AND 4:00PM**

PLEASE BRING UNEXPIRED DRIVER'S LICENSE AND/OR IDENTIFICATION DOCUMENTS!

1677 LEWIS WAY • STONE MOUNTAIN, GEORGIA 30083
PHONE: (404) 297-9150 **FAX: (404) 297-8520**

**PIERRE CONSTRUCTION GROUP, INC.
APPLICATION FOR EMPLOYMENT**

Personal Information

Name: _____

Social Security #: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone Number: _____

Alternate Number: _____

E-Mail Address: _____

How did you hear about us?: _____

Position Applied For: _____

Date Available: _____

Shirt Size (circle one): S M L XL XXL XXXL

Education

Grammar School: _____ Location: _____

Years attended: _____ Did you graduate: ____ When? _____

High School: _____ Location: _____

Years attended: _____ Did you graduate: ____ When?: _____

College/University: _____ Location: _____

Years attended: _____ Did you graduate: ____ When?: _____

Major: _____

Other Education: _____ **Location:** _____

Years attended: _____ **Did you graduate:** ____ **When?:** _____

Major: _____

List any other special skills or training that are relevant to the job that you are applying:

Work History

Please start with the most recent employer.

From: _____ **To:** _____ **Name of Employer:** _____

City/State: _____ **Starting Salary:** _____ **Ending Salary:** _____

Position: _____ **Reason for Leaving:** _____

Describe job duties: _____

From: _____ **To:** _____ **Name of Employer:** _____

City/State: _____ **Starting Salary:** _____ **Ending Salary:** _____

Position: _____ **Reason for Leaving:** _____

Describe job duties: _____

From: _____ **To:** _____ **Name of Employer:** _____

City/State: _____ **Starting Salary:** _____ **Ending Salary:** _____

Position: _____ **Reason for Leaving:** _____

Describe job duties: _____

References

Please provide us with three professional or personal references of whom you have known at least 1 year.

Name: _____ **Years Known:** _____

Relationship: _____ **Phone:** _____

Name: _____ **Years Known:** _____

Relationship: _____ **Phone:** _____

Name: _____ **Years Known:** _____

Relationship: _____ **Phone:** _____

Emergency Contact 1: _____ **Phone:** _____

Emergency Contact 2: _____ **Phone:** _____

DRIVING RECORD

Have you in the last three years been convicted of the following?

- 1. **DWI/DUI** **YES** **NO**
- 2. **Reckless Driving** **YES** **NO**
- 3. **Suspended License** **YES** **NO**
- 4. **Drug Offense** **YES** **NO**
- 5. **Speeding 25 MPH, or More, Above the Speed Limit** **YES** **NO**
- 6. **Hit & Run / Leaving the Scene of an Accident** **YES** **NO**
- 7. **2 or More At-Fault Accidents** **YES** **NO**
- 8. **3 or More Moving Violations** **YES** **NO**
- 9. **Less Than 3 Years of Driving Experience** **YES** **NO**

If you answered “Yes” to any of the questions above, please provide a brief explanation:

- **I certify that all of the information on this application is correct and accurate to the best of my knowledge.**
- **Any falsified or untrue information will be grounds for dismissal.**
- **I authorize the investigation of my background references.**

Name: _____ **Date:** _____

Signature: _____