



**INLAND CONTRACTORS, INC.**

9327 Douglas Dr.  
Riverside, CA 92503  
(951) 276-0600 (Office)  
(951) 276-0602 (Fax)  
inlandcontractors@yahoo.com (email)

**EMPLOYMENT APPLICATION**

POSITION APPLIED FOR: \_\_\_\_\_ DATE \_\_\_\_\_

I have read the job description and understand the job duties for the position.....  Yes  No

PERSONAL INFORMATION

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Drivers License No: \_\_\_\_\_ State: \_\_\_\_\_ Class: \_\_\_\_\_

EDUCATION

School Name: \_\_\_\_\_ Degree: \_\_\_\_\_  
Address: \_\_\_\_\_  
Website: \_\_\_\_\_ Dates: \_\_\_\_\_  
Units Completed: \_\_\_\_\_ Did you Graduate?  Yes  No

School Name: \_\_\_\_\_ Degree: \_\_\_\_\_  
Address: \_\_\_\_\_  
Website: \_\_\_\_\_ Dates: \_\_\_\_\_  
Units Completed: \_\_\_\_\_ Did you Graduate?  Yes  No

School Name: \_\_\_\_\_ Degree: \_\_\_\_\_  
Address: \_\_\_\_\_  
Website: \_\_\_\_\_ Dates: \_\_\_\_\_  
Units Completed: \_\_\_\_\_ Did you Graduate?  Yes  No

To qualify to this position, you may use any combination of education and experience that would provide required knowledge and abilities. **I understand that I must submit proof of education by the final filing deadline if I am using education to qualify for this position.** Qualifying documents are unofficial college transcripts, certificates, and/or degree diplomas.

WORK EXPERIENCE (List most current job first) (attach additional pages as needed)

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Website: \_\_\_\_\_ Position: \_\_\_\_\_

Dates: \_\_\_\_\_ Hours/Week: \_\_\_\_\_

May we contact this employer?  Yes  No

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Summary of Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Website: \_\_\_\_\_ Position: \_\_\_\_\_

Dates: \_\_\_\_\_ Hours/Week: \_\_\_\_\_

May we contact this employer?  Yes  No

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Summary of Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Website: \_\_\_\_\_ Position: \_\_\_\_\_

Dates: \_\_\_\_\_ Hours/Week: \_\_\_\_\_

May we contact this employer?  Yes  No

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Summary of Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer:	_____	Phone:	_____
Address:	_____		
Website:	_____	Position:	_____
Dates:	_____	Hours/Week:	_____
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Supervisor:	_____	Phone:	_____
Reason for Leaving:	_____		
Summary of Duties:	_____		
_____			
_____			
_____			

I understand that I **must list** current and/or past job-related experience in the "**Work Experience**" section of the employment application. The experience I list will be used to determine if I meet the minimum qualifications as stated on the job announcement. Applications that do not list current and/or past job-related experience will be considered incomplete and will be rejected; omitted information cannot be considered or assumed. A resume, responses to the supplemental questions, or employment history listed elsewhere in the application or attachments **will not substitute** for the information required in the "Work Experience" section of the employment application.

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CERTIFICATES, LICENSES & OTHER ACHIEVEMENTS

In addition to your work history, please list any other special training, licenses and/or certificates you possess.

Cert Type:	_____	Number:	_____
Date Issued:	_____	Expiration Date:	_____
Cert Type:	_____	Number:	_____
Date Issued:	_____	Expiration Date:	_____
Cert Type:	_____	Number:	_____
Date Issued:	_____	Expiration Date:	_____
Cert Type:	_____	Number:	_____
Date Issued:	_____	Expiration Date:	_____

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PROFESSIONAL REFERENCES (Individuals who can speak to your work experience)

Name: _____	Phone: _____
Email: _____	Years Acquainted: _____
Name: _____	Phone: _____
Email: _____	Years Acquainted: _____
Name: _____	Phone: _____
Email: _____	Years Acquainted: _____

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ADDITIONAL INFORMATION

1. Date you would be available for work: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

2. Are you currently employed?.....  Yes  No

3. Do you have transportation to and from work? .....  Yes  No

4. Military: Have you ever been a member of the U.S. armed forces? .....  Yes  No

Training and Experience: \_\_\_\_\_

5. Do you have a high school diploma or equivalent? .....  Yes  No

6. Please list any other names used: \_\_\_\_\_

7. I understand that as a condition of employment I may be required to pass a criminal background check.....  Yes  No

8. Have you ever failed a pre-employment drug screening test? .....  Yes  No

If yes, please explain \_\_\_\_\_

9. I understand that I may be required to pass a post-offer physical examination and drug screening.....  Yes  No

10. I understand that I will be required to show proof of a valid California Driver's License and depending on the position that I am applying for may be required to provide a current DMV printout to verify my driving record. ....  Yes  No

11. Can you perform the duties of the job description without accommodation?.....  Yes  No

If no, what can be done to reasonably accommodate your condition? \_\_\_\_\_

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12. Are you in a familial, cohabitant, or amorous relationship with any current employee of Inland Contractors, Inc.....  Yes  No

Examples of these relationships include: relationships by blood— parent, child, grandparent, grandchild, brother, sister, uncle, aunt, nephew, niece and first cousin; and relationships by marriage— husband, wife (as defined by state law), step-parent, step-child, brother-in-law, sister-in-law, father-in-law, mother-in-law, son-in-law, daughter-in-law, half-brother, half-sister, uncle, aunt, nephew, niece, spouse/partner of any of the above and co-habiting couples or significant others.

If yes, please list the name of the relative and the relationship \_\_\_\_\_

\_\_\_\_\_

I CERTIFY THAT ALL STATEMENTS IN THIS APPLICATION ARE TRUE AND COMPLETE. I AGREE AND UNDERSTAND THAT ANY MISSTATEMENTS OR OMISSIONS OF MATERIALS FACTS HEREIN WILL CAUSE FORFEITURE ON MY PART OF ALL RIGHTS TO EMPLOYMENT BY INLAND CONTRACTORS, INC. I UNDERSTAND THAT IF I DO NOT MEET CERTIFICATION REQUIREMENTS, I WILL BE ELIMINATED FROM EMPLOYMENT CONSIDERATION. I HEREBY AUTHORIZE INLAND CONTRACTORS, INC. TO VERIFY THE ACCURACY OF THE INFORMATION I HAVE PROVIDED ON THIS APPLICATION.

FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS SUBJECT TO A PROBATIONARY PERIOD, DURING WHICH TIME SAID EMPLOYMENT MAY BE TERMINATED AT ANY TIME WITH OR WITHOUT CAUSE AND WITHOUT NOTICE.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Revised 03/2021

Please fax, email or drop your application in our mail slot, along with copies of your certificates.

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