



**The Project Company**

## Job Application

### Instructions:

1. Fill out the attached application to the best of your abilities.
2. Attach a resume if applicable.
3. Turn in application via email, fax, or in person.

Questions? Email [jgrow@theprojectcompany.co](mailto:jgrow@theprojectcompany.co).



# The Project Company

## Job Application

(Last)

(First)

(M.I.)

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

Phone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you a U.S. citizen?      Yes      No      SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

If "No," do you have a green card?      Yes      No

If "Yes," check one of the following:

A copy of my green card is attached to this application.

I can provide my green card information in person.

Highest Education Attained:      Some High School      High School Graduate      Some College  
   Associates Degree      Trade School      Bachelors Degree      None

Relevant Experience?      Yes      No

If yes, please describe briefly: \_\_\_\_\_

Most recent employment:

Job Title: \_\_\_\_\_ Contact info: \_\_\_\_\_

Employer: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

### Availability:

Days:    M    T    W    Th    F    Sat    Sun      # hours/week: \_\_\_\_\_

Are you able and willing to work:      Early mornings      Late nights      Neither

Type of employment:      Part-time      Full time      Seasonal      Intern

### Interns Only:

Program Name: \_\_\_\_\_

Program Contact: \_\_\_\_\_

I am attaching additional paperwork required by my program:      Yes      No



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### References:

1. Name: \_\_\_\_\_  
 Phone #: \_\_\_\_\_  
 Relationship: \_\_\_\_\_
2. Name: \_\_\_\_\_  
 Phone #: \_\_\_\_\_  
 Relationship: \_\_\_\_\_

### Abilities/Qualifications:

<input type="checkbox"/> Driving	<input type="checkbox"/> Own a vehicle?
<input type="checkbox"/> Physical labor	<input type="checkbox"/> Own or can purchase work boots

Driver's License Status:      Valid      Suspended      Revoked

Do you have a criminal record?      Yes      No

If yes, please describe: \_\_\_\_\_

Have you ever been convicted of a DUI?      Yes      No

Chemical Sensitivities?      Yes      No      Any particular chemical? \_\_\_\_\_

If yes, select applicable:      Scents      Touch      Other

Allergies?      Yes      No

If yes, please describe: \_\_\_\_\_

Glove Size:    S    M    L    XL      Tshirt Size:    XS    S    M    L    XL    XXL

How did you hear about us? (Please select all that apply)

Friend      Coworker      University, career center, etc.      Social Media

Online      Current Employee      Other: \_\_\_\_\_

Are you including a resume?      Yes      No

Select your preferred method of contact:      Email      Phone



**The Project Company**

I confirm that the information contained in this application is accurate to the best of my knowledge. I understand that I am applying to The Project Company, and I consent to be contacted regarding my application via any form of communication I have included above.

Applicant Name (print) \_\_\_\_\_

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

Date \_\_\_\_\_

Thank you for applying!