



www.thundercontractinginc.com • Email: applications@thunderdisaster.com
 18001 Great Smoky Mtn. Exp., Waynesville, NC 28786
 Phone: 828-452-3335 • FAX: 828-452-6993
 NC License # 64162 • SC License # 113786

APPLICATION FOR EMPLOYMENT

Work Experience Please list your work experience for the **past five years** beginning with your most job you 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.

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May we contact your present employer? Yes No

Did you complete this application yourself? Yes No

If not, who did? _____



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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 _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? ____ Yes ____ No

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. _____

DO YOU HAVE A DRIVER'S LICENSE? ____ Yes ____ No

What is your means of transportation to work? _____

Driver's License number _____ State _____ Exp. Date _____

____ Operator ____ Commercial (CDL) ____ Chauffeur Exp. Date _____

Have you had any accidents in the past three years? ____ How many? ____

Have you had any moving violations during the pasts three years? ____ How many? ____

Please list two references other than relatives or previous employers.

Name _____ Name _____

Position _____ Position _____

Company _____ Company _____

Address _____ Address _____

Telephone (____) ____-____ Telephone (____) ____-____

*** Thunder Contracting, Inc. is an equal opportunity employer**

**** Thunder Contracting, Inc. does practice random employee drug testing.**

I have read the information contained in the application carefully and certify that the information I have given is correct and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for my dismissal.

Signature

Date