Plan Build Service

EMPLOYMENT APPLICATION

Corporate Headquarters:
15205 Alton Parkway
Irvine, CA 92618
949.870.4500

Houston Division:
11410 Brittmoore Park Drive
Houston, TX 77041
713.934.7171

An Equal Opportunity Employer

Please Print

EMPLOYMENT DESIRED

Position Applying for: _____ Desired Salary: _____ Date Available: _____

Have you ever applied to, or worked for, LCS before? Yes ❑ No ❑ If yes, when? _____

Do you have any friends for relatives working for LCS? Yes ❑ No ❑

If yes, please state name(s) and relationship:

_____ _____
Name Relationship

_____ _____
Name Relationship

Why do you want to work at LCS? _____

PERSONAL INFORMATION

_____ _____
Name (Last, First, Middle) Date

_____ _____
Social Security No. Phone

_____ _____
Address City, state, Zip

If hired, would you have a reliable means of transportation to and from work? ..... Yes ❑ No ❑

Are you at least 18 years old (if under 18, hire is subject to verification that you are of minimum legal age)? ..... Yes ❑ No ❑

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? ..... Yes ❑ No ❑

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? ..... Yes ❑ No ❑

If no, please describe the functions that cannot be performed: _____

Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/ employees to perform essential functions. Hire may be subject to passing a medical examination and to skill and agility tests.

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? ..... Yes ❑ No ❑

If yes, please state nature of the crime(s), when and where convicted, and disposition of the case (convictions for marijuana-related offenses that are more than two years old need not be listed):

_____

_____

Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for may, however, be taken into consideration.

EDUCATION

SCHOOL	NAME & LOCATION	# OF YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
High School	_____ Name _____ City, State	_____	Yes ❑ No ❑	_____

EDUCATION CONTINUED

Business or Technical School

Name _____ _____ Yes ☐ No ☐ _____

City, State _____

Undergraduate College / University

Name _____ _____ Yes ☐ No ☐ _____

City, State _____

Graduate School

Name _____ _____ Yes ☐ No ☐ _____

City, State _____

EMPLOYMENT HISTORY

List below all present and past employment beginning with your most recent employer (last five years is sufficient). You must complete this section even if attaching a resume.

Name of Employer _____ Telephone Number (Including Area Code) _____

Address _____ City, State, Zip _____

Supervisors Name _____ Reason for leaving _____

Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____ (Hr, Yr, etc.) _____

Your position and duties _____

May we contact this employer for a reference? ..... Yes ☐ No ☐

Name of Employer _____ Telephone Number (Including Area Code) _____

Address _____ City, State, Zip _____

Supervisors Name _____ Reason for leaving _____

Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____ (Hr, Yr, etc.) _____

Your position and duties _____

May we contact this employer for a reference? Yes ☐ No ☐

Name of Employer _____ Telephone Number (Including Area Code) _____

Address _____ City, State, Zip _____

Supervisors Name _____ Reason for leaving _____

Dates of Employment: From _____ To _____ Salary: Beginning _____ Ending _____ (Hr, Yr, etc.) _____

Your position and duties _____

May we contact this employer for a reference? Yes ☐ No ☐

NOTE: Attach additional pages if necessary.

REFERENCES

List below three (3) persons, not related to you, who have knowledge of your work performance within the last three years.

Name _____ Telephone No. _____

Address _____ City, State, Zip _____

Occupation _____ No. of Years Acquainted _____

Name _____ Telephone No. _____

Address _____ City, State, Zip _____

Occupation _____ No. of Years Acquainted _____

Name _____ Telephone No. _____

Address _____ City, State, Zip _____

Occupation _____ No. of Years Acquainted _____

EMERGENCY CONTACT

Please provide LCS with an emergency contact name, phone number and relation to you:

Name _____ Phone _____ Relationship _____

Please read carefully, initial each paragraph and sign below

_____ Initials — I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ Initials — I hereby authorize LCS Constructors, Inc., to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the reference I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ Initials — I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company and that no promises or representations contrary to the foregoing are binding on the Company unless made in writing and signed by me and the Company's designated representative.

_____ Initials — Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by the internal personnel employed by the Company I am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

☐ I waive receipt of a copy of any public record described in the paragraph above.

Applicant's Signature _____ Date _____