



An Equal Opportunity Employer M/F/V/H
 Drug Free Workplace
 Employment Application

LAST NAME	FIRST	MIDDLE	ALIAS NAME(S) AND DATES USED
PRESENT ADDRESS (Street, P.O. Box)	CITY	STATE	ZIP CODE
IN CASE OF EMERGENCY, NOTIFY (Name, Address, Phone (including area code)) ¹			ARE YOU UNDER 18? Yes <input type="checkbox"/> No <input type="checkbox"/>
			SOCIAL SECURITY NO.
RELATIVE OR FRIENDS WORKING FOR WRS? Yes <input type="checkbox"/> No <input type="checkbox"/>			U.S. CITIZEN? Yes <input type="checkbox"/> No <input type="checkbox"/>
NAMES AND RELATIONSHIP ¹			DATE AVAILABLE
			SALARY REQUIREMENTS

U.S. MILITARY HISTORY

BRANCH	DATE ENTERED	DATE DISCHARGED	HIGHEST RANK ATTAINED AND UNIT
ARMED FORCES RESERVE BRANCH OR NATIONAL GUARD ACTIVE <input type="checkbox"/> INACTIVE <input type="checkbox"/>	INDICATE SPECIFIC SKILLS ACQUIRED IN THE U.S. ARMED FORCES		

EDUCATIONAL BACKGROUND

CIRCLE HIGHEST GRADE COMPLETED IN EACH SCHOOL CATEGORY	GRADE SCHOOL	SECONDARY SCHOOL	TRADE / TECH / BUS. SCHOOL	COLLEGE	GRADUATE SCHOOL		
	1 2 3 4 5 6 7 8	9 10 11 12	1 2 3	1 2 3 4	1 2 3 4		
SECONDARY SCHOOL, CITY, AND STATE				YEAR GRADUATED	MAJOR COURSE		
COLLEGES/UNIVERSITIES ATTENDED COMPLETE RELEASE OF INFORMATION, PAGE 3	DATES ATTENDED	DID YOU GRADUATE?	DEGREE	MAJOR SUBJECT	G.P.A. MAJOR	G.P.A. OVERALL	CLASS STANDING (TOP 1/2, 1/4, ETC.)
	FROM TO						
	FROM TO						
	FROM TO						
	FROM TO						
TRADE / TECHNICAL BUSINESS SCHOOL	FROM TO						
HONORS & ACTIVITIES							

ACADEMIC RELEASE OF INFORMATION

PLEASE INDICATE YOUR FULL NAME WHEN ACADEMIC RECORD WAS ESTABLISHED (Please Print)

SCHOOL NAME

ADDRESS, STREET & NO. CITY STATE ZIP

SCHOOL NAME

ADDRESS, STREET & NO. CITY STATE ZIP

SCHOOL NAME

ADDRESS, STREET & NO. CITY STATE ZIP

SCHOOL NAME

ADDRESS, STREET & NO. CITY STATE ZIP

I HEREBY AUTHORIZE THE RELEASE OF MY ACADEMIC RECORD FROM THE ABOVE SCHOOLS, COLLEGES AND/OR UNIVERSITIES.

SIGNATURE _____ APPLICANT _____ DATE _____

LIST BOOKS, ARTICLES AND THESES WHICH YOU HAVE AUTHORED

LIST ANY PATENTS, PATENT APPLICATIONS & DISCLOSURES

¹ DO NOT COMPLETE IN THE STATE OF NEW YORK

EMPLOYMENT HISTORY

Please cover employment for at least ten years including U.S. Military, if applicable¹

1 - NAME AND ADDRESS OF PRESENT OR LAST EMPLOYER

PHONE (include area code)

DATES OF EMPLOYMENT		POSITION
FROM	TO	
NAME AND TITLE OF IMMEDIATE SUPERVISOR		SALARY \$
DESCRIBE DUTIES		
REASON FOR LEAVING		

2 - NAME AND ADDRESS OF PRESENT OR LAST EMPLOYER

PHONE (include area code)

DATES OF EMPLOYMENT		POSITION
FROM	TO	
NAME AND TITLE OF IMMEDIATE SUPERVISOR		SALARY \$
DESCRIBE DUTIES		
REASON FOR LEAVING		

3 - NAME AND ADDRESS OF PRESENT OR LAST EMPLOYER

PHONE (include area code)

DATES OF EMPLOYMENT		POSITION
FROM	TO	
NAME AND TITLE OF IMMEDIATE SUPERVISOR		SALARY \$
DESCRIBE DUTIES		
REASON FOR LEAVING		

4 - NAME AND ADDRESS OF PRESENT OR LAST EMPLOYER

PHONE (include area code)

DATES OF EMPLOYMENT		POSITION
FROM	TO	
NAME AND TITLE OF IMMEDIATE SUPERVISOR		SALARY \$
DESCRIBE DUTIES		
REASON FOR LEAVING		

5 - NAME AND ADDRESS OF PRESENT OR LAST EMPLOYER

PHONE (include area code)

DATES OF EMPLOYMENT		POSITION
FROM	TO	
NAME AND TITLE OF IMMEDIATE SUPERVISOR		SALARY \$
DESCRIBE DUTIES		
REASON FOR LEAVING		

OTHER EMPLOYERS¹

EMPLOYER	DATES EMPLOYED	REASON FOR LEAVING
EMPLOYER	DATES EMPLOYED	REASON FOR LEAVING
EMPLOYER	DATES EMPLOYED	REASON FOR LEAVING
EMPLOYER	DATES EMPLOYED	REASON FOR LEAVING
EMPLOYER	DATES EMPLOYED	REASON FOR LEAVING

APPLICANT'S RIGHT TO WITHHOLD INFORMATION

When applying for a position in Massachusetts, it is not necessary that you inform potential employers of first convictions for drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace or any misdemeanor conviction that is more than five years old. In addition, you need not inform them of juvenile convictions for which the records are sealed.

Consistent with the above, Chapter 276, Section 100A and 100C of Massachusetts General Law, require that this application include the following statement regarding an applicant's right to withhold information:

"An applicant for employment with a sealed record on file with the Commissioner of Probation may answer "No Record" with respect to an inquiry herein relative to prior arrests, court appearances, or convictions. In addition, any applicant for employment may answer "No Record" with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the Superior Court for criminal prosecution."

Accordingly, if you have a conviction record and, per the above, you have the right to withhold information concerning this record, you may place an "X" in the "No" box on the above applicant security information. The company does not request you furnish, and will not make or keep a record of any criminal information prohibited by G.L.C. 15B 4(9).

Signature¹ _____
Applicant Date

In some states it is unlawful for any employer to require or administer, a polygraph, lie detector or similar test or examination as a condition of employment or continued employment, and employers in these states are subject to civil and/or criminal penalties. It is the policy of WRS Infrastructure & Environment, Inc. (WRS) and in all other states as well, not to require an applicant to submit to taking a polygraph, lie detector or similar test or examination as a condition of employment or continued employment (except where required for national security in accordance with federal requirements). In the state of Maryland, your signature is required to acknowledge that you have read and understood this statement.

Signature _____
Applicant Date

FORMER MILITARY PERSONNEL ONLY: I hereby authorize the National Personnel Records Center, St. Louis, MO, or other custodian of my military record to release to WRS Infrastructure & Environment, Inc., (WRS) or its designated representative information or photocopies from my military personnel and related medical records, or only the following military information/records. This could include a photocopy of my DD Form 214, Report of Separation.

Signature _____
(If former military) Applicant Date

I consent to the WRS Infrastructure & Environment, Inc. (WRS) seeking and obtaining job-related information concerning my previous employment and I give consent to my previous employers and release them from all liability in connection with their providing to WRS job-related information concerning my employment.

My signature below indicates that I have read, understood and consented to the above statement and that I have made true, correct and complete answers and statements on Pages 1 through 4 of this application and any supplements to it in the knowledge that they will be relied upon in considering my application for employment, and I understand that any omission, false answer or statement made by me on this application, or any supplements to it, will be sufficient ground for my discharge.

Signature _____
Applicant Date

¹ IN THE STATE OF MASSACHUSETTS, SIGNATURE IS REQUIRED

APPLICANT SECURITY INFORMATION: The information below will be maintained separately, not as a part of your permanent employment record.

LAST NAME	FIRST	MIDDLE	SOCIAL SECURITY NO.	
PRESENT ADDRESS (STREET / P.O. BOX)	CITY	STATE	ZIP CODE	PHONE (Include Area Code)

If you have been convicted for violating any law² except that which has been annulled for sealed by the court. Place an "X" in the "Yes" box below. A "Yes" will not necessarily disqualify you for employment consideration. Do not designate "Yes" for traffic violations unless applying for motor vehicle operation.

If you have not been convicted for violating any law, place a "X" in the "No" box.

Yes No

If you have responded with a "Yes", explain conviction(s) below:

I CONSENT TO THE WRS INFRASTRUCTURE & ENVIRONMENT, INC. (WRS) SEEKING AND OBTAINING INFORMATION CONCERNING MY PRIOR CRIMINAL CONVICTION, AND I GIVE CONSENT TO THE APPROPRIATE AUTHORITIES TO PROVIDE INFORMATION CONCERNING MY PRIOR CRIMINAL CONVICTION TO WRS.

Signature _____
Applicant

² LIMIT TO THE PAST SEVEN (7) YEARS FOR THE STATE OF WASHINGTON