



BUILDING CORPORATION

9025 Overlook Blvd., Ste. 100, Brentwood, TN 37027
615-321-4499 • Fax 615-327-4171 • www.orionbldg.com

Employment Application

* after completing application, email to:
hr@orionbldg.com

GENERAL INFORMATION	Name		
	Current Address		Telephone
	Months at current address?	Have you ever been convicted of a felony? <input type="checkbox"/> No <input type="checkbox"/> Yes	Are you under age 18 <input type="checkbox"/> No <input type="checkbox"/> Yes
	Are you currently authorized to work in the United States? <input type="checkbox"/> No <input type="checkbox"/> Yes (<i>Proof of eligibility will be required if hired</i>)		
	Position applying for		Salary desired
	Employment desired <input type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> FULL- OR PART-TIME		
	When are you available to start work?		

EDUCATION		Name of School	Location	Yrs Completed	Degree & Major
	High School				
	College/University				
	Graduate Studies				
	Technical School				

REFERENCES	<i>(Please list two references other than relatives)</i>	
	Name	Name
	Position	Position
	Company	Company
	Address	Address
	Telephone	Telephone

MILITARY SERVICE	Have you ever been in the Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Specialty	Date Entered	Discharge Date
	Are you now a member of the National Guard? <input type="checkbox"/> Yes <input type="checkbox"/> No		

WORK EXPERIENCE	<i>Please list your work experience for the past seven years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.</i>	
	Name of Employer	Name of Supervisor
	Address	Employment Dates From To
	City, State, Zip Code	Position
	Phone number	Salary
	Reason for leaving	

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WORK EXPERIENCE	Name of Employer	Name of Supervisor Address
	Address	Employment Dates From To
	City, State, Zip	Position
	Phone number	Salary
	Reason for leaving	
	Name of Employer	Name of Supervisor
	Address	Employment Dates From To
	City, State, Zip	Position
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	Name of Employer	Name of Supervisor
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	City, State, Zip	Position
	Phone number	Salary
	Reason for leaving	

May we contact your current employer <input type="checkbox"/> Yes <input type="checkbox"/> No
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**PLEASE READ CAREFULLY
APPLICATION FORM WAIVER**

As indication that you have read and understood each sentence, please sign in the space provided below.

In exchange for the consideration of my job application by Orion Building Corporation , I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Orion Building Corporation, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Owner/Managing Member of Orion Building Corporation. Both the undersigned and Orion Building Corporation may end the employment relationship at any time, without specified notice or reason. If employed, I understand that Orion Building Corporation may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits. I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Orion Building Corporation permission to contact schools, all previous employers (unless otherwise indicated), references and others and hereby release Orion Building Corporation from any liability as a result of such contact. I further understand that my employment with Orion Building Corporation shall be probationary for a period of ninety (90) days and further that at any time during the probationary period or thereafter, my employment relationship with the Company is terminable at will for any reason by either party.

Signature of Applicant _____ **Date:** _____

Orion Building Corporation is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Orion Building Corporation depends solely on your qualifications.