

SAGE Right of Way Management, Inc.

PO Box 2184 Lexington, SC 29071 Phone: 864-431-1189 Fax 888-259-SAGE (7243) janderson@thesageco.com

Employment Application

Applicant Information								
Full Name:				Date:				
	Last	First		M.I.				
Address:								
7100.000.	Street Address				Apartment/Unit #			
	City			State	ZIP Code			
Phone:				Email				
i none.				Lindii_				
Date Availal	ole: Socia	al Security	No.:	Desired Salary:	\$			
Position App	olied for:							
Emergency	Contact Name			Phone #				
		YES	МО		YES NO			
Are you a ci	tizen of the United States?			If no, are you authorized to work in the	e U.S.? □ □			
					YES NO			
		YES	NO					
Do you consent to a drug test?				Do you consent to a back ground check?				
					YES NO □ □			
Have you ev	ver filed a workers compensation	on YES	NO	Do you have any previous injuries or restrictions that would prevent you from				
claim?				preforming this job? If yes explain:				
	on boom and detail of a fallow (YES	МО	Maria and the				
Are you on I	ver been convicted of a felony? Probation?	? 🗆	Ш	If yes, explain:				
YES	NO ☐ If yes, explain:							
Do you have	e previous injuries that would p	revent yo	u fror	n preforming this type of work?				
			Ed	ucation				
High School	:							
				YES NO				
From:	To:	Did you gra	aduat	te? □ □ Diploma::				

College:						
From:	To:	Did you graduate?	YES	NO	Degree:	
Other:						
From:	To:	Did you graduate?	YES	NO	Degree:	
		Refere	ences			
Please list three	professional ref	erences.				
Full Name:					Relationship:	
Company:					Phone:	
Address:						
Full Name:					Relationship:	
0						
Address:						
Full Name:					Relationship:	
0						
Address:						
		Previous E	mploy	ment		
Company:					Phone:	
Address:						
Job Title:		Starting S		3		
Responsibilities:						
From:		:			aving:	
May we contact y	your previous sup	ervisor for a reference?	YES	_	0	
Company:					Phone:	
A .l.l						
Job Title:		Starting S	Ending Salary:	;		
Responsibilities:						
From:	To	:	Reaso	n for Le	aving:	
May we contact y	your previous sup	ervisor for a reference?	YES		o]	

Company:				Phone:Supervisor:				
Job Title:	Starting S	Ending Salary: <u>\$</u>						
Responsibili	ties:							
From:	To:	Reason	for Leaving:_					
May we con	tact your previous supervisor for a reference?	YES	NO					
Disclaimer and Signature								
I certify that	t my answers are true and complete to the be	st of my k	nowledge.					
	cation leads to employment, I understand that ay result in my release.	t false or i	misleading in	formation in my application or				
Signature:				Date:				