

BASELINE

SITE SERVICES

[RESET FORM](#)

EMPLOYMENT APPLICATION

OFFICE (907) 376-1957

EMAIL info@baselinesiteservices.com

RETURN COMPLETED APPLICATIONS VIA EMAIL

CONTACT INFORMATION		
First Name	Middle Name	Last Name
Address		
City	State	Zip
Primary Phone	Alternate Phone	Email

GENERAL INFORMATION			
Are you legally authorized to work in the United States?		☐ Yes	☐ No
Will you now or in the future require sponsorship for employment visa status?		☐ Yes	☐ No
Are you at least 18 years of age?		☐ Yes	☐ No
Which position(s) are you applying for?		☐ Abatement Laborer	☐ Project Supervisor
		☐ PM / Estimator	☐ Administrative / Office
How did you hear about this position?		Date available to start	
Type of employment desired:		☐ Full-Time	☐ Part-Time
		☐ Seasonal	☐ Any
Are you willing to travel and work at remote job sites, including fly-in or camp-style sites in Alaska?		☐ Yes	☐ No
Are you able and willing to work overtime, weekends, and varying shifts as projects require?		☐ Yes	☐ No
Desired pay rate or salary. Note that for employees working directly on projects covered by Davis-Bacon and Related Wage Acts, wages will be based upon the Wage Determination for that project.			
Indicate the certifications you currently hold. Include date of initial training, current expiration, and certification numbers where applicable.			
Certification	Initial	Expiration	Certification Number
☐ Asbestos Worker / Supervisor			
☐ HAZWOPER 40-hour			
☐ Lead-based Paint Training			
☐ First Aid / CPR			
☐ Other:			
Do you have a valid drivers license? ☐ Yes ☐ No			
This position requires wearing a tight-fitting respirator for full shifts and being clean-shaven where the respirator seals.		☐ Yes ☐ No	
Can you perform this requirement, with or without reasonable accommodation?			
Select any respiratory protection you have used:		☐ Half-Face Respirator	☐ Powered-Air Purifying Respirator (PAPR)
		☐ Full-Face Respirator	☐ Supplied Air
Total years of relevant industry experience (abatement, demolition, construction):			
Additional experience, skills, or equipment you operate that are relevant:			
Have you previously worked on any government facilities, military installations, or other restricted access project sites?			
If so, list the most recent locations, dates, and your role.			
Location	Dates	Role	
Location	Dates	Role	
Location	Dates	Role	

WORK EXPERIENCE

1. Current /Past Employer Name

Employer Address			
Phone Number		Supervisor Name	Supervisor Title
Start Date	End Date	Weekly Hours	Pay / Salary
Title & Duties			

2. Past Employer Name

Employer Address			
Phone Number		Supervisor Name	Supervisor Title
Start Date	End Date	Weekly Hours	Pay / Salary
Title & Duties			

3. Past Employer Name

Employer Address			
Phone Number		Supervisor Name	Supervisor Title
Start Date	End Date	Weekly Hours	Pay / Salary
Title & Duties			

EDUCATION AND REFERENCES

Highest Level of Education Completed	☐ HS/GED ☐ Trade or Vocational School ☐ Some College ☐ Associate's Degree ☐ Bachelors
School Name, Location, and Degree or Program	

1. Professional Reference Name

Relation		Phone	Years Known
Email			

2. Professional Reference Name

Relation		Phone	Years Known
Email			

3. Professional Reference Name

Relation		Phone	Years Known
Email			

PRE-EMPLOYMENT SCREENING

Can you perform the essential functions of the position, with or without reasonable accommodation? Essential functions include working in protective clothing and respirators, using power and hand tools, lifting 50 lbs, climbing, working at heights and in confined spaces, and working outdoors in Alaska conditions.	☐ Yes	☐ No
Are you willing to take a pre-employment drug screen and participate in the company drug-free workplace program?	☐ Yes	☐ No
Do you consent to a background check (including motor vehicle record and employment verification) as a condition of employment?	☐ Yes	☐ No

CERTIFICATION AND SIGNATURE

I certify that all information provided in this application is true and complete to the best of my knowledge. I understand that false or misleading information may result in rejection of my application or termination of employment, that this application does not create a contract of employment, and that employment with Baseline Site Services LLC is at-will unless otherwise agreed in writing.		☐ I certify and agree
_____ Signature (type your full legal name if digital)		_____ Date