



# Orme Circle Properties, LLC

## Independent Contractor Application

**ALL BLANKS MUST COMPLETED FOR YOUR APPLICATION TO BE EVALUATED.** *If a question does not apply to you write 'N/A'.*

### Applicant Information

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address, City, State & Zip

Phone/SMS: \_\_\_\_\_ E-Mail \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Desired Pay Min (Hr):\$ \_\_\_\_\_ Desired Pay Max (Hr):\$ \_\_\_\_\_

Days of Week & Hours Available: \_\_\_\_\_

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

Have you ever been convicted of a felony? YES ☐ NO ☐ If yes, explain? \_\_\_\_\_

Do you own a car?: YES ☐ NO ☐ Driver's License & State \_\_\_\_\_

### Education

High School: \_\_\_\_\_ City/State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES ☐ NO ☐ If 'No', do you have a GED?: \_\_\_\_\_

College: \_\_\_\_\_ City/State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES ☐ NO ☐ Degree: \_\_\_\_\_

Other: \_\_\_\_\_ City/State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES ☐ NO ☐ Degree: \_\_\_\_\_

### References

*Please list two personal references that are not related to you.*

Full Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

City/State: \_\_\_\_\_

Full Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

City/State: \_\_\_\_\_

### Previous Work Experience (Most recent first)

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
City/State: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Pay (Hr):\$ \_\_\_\_\_ Ending Pay (Hr):\$ \_\_\_\_\_

Responsibilities/Skills Applied: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
City/State: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Pay (Hr):\$ \_\_\_\_\_ Ending Pay (Hr):\$ \_\_\_\_\_

Responsibilities/Skills Applied: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

### Professional Certifications, Bonding & Insurance

*Please list the type any active professional certifications licensed by the State of Georgia that you may have:*

Type: \_\_\_\_\_ License No: \_\_\_\_\_  
Type: \_\_\_\_\_ License No: \_\_\_\_\_  
Type: \_\_\_\_\_ License No: \_\_\_\_\_

Health Insurance Coverage Provider: \_\_\_\_\_ Policy No: \_\_\_\_\_  
WC Insurance Coverage Provider: \_\_\_\_\_ Policy No: \_\_\_\_\_  
Auto Insurance Coverage Provider: \_\_\_\_\_ Policy No: \_\_\_\_\_

### Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge. By signing below, I authorize Orme Circle Properties, LLC or its agents to conduct a criminal and credit background check. If my application leads to a contract position, I understand that false or misleading information provided in my application or interview may result in the immediate termination of my contract employment.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_