



STEEL ERECTORS, INC.
HOUSTON, TX

281-449-2099

macjrsteelerectorsinc@gmail.com

CLIENT NAME: _____ **CLIENT ID:** _____

Employee Name: _____ **SS #:** _____

Street Address: _____ **City:** _____

State: _____ **Zip:** _____ **County:** _____

Email: _____ **Phone Number:** _____

Birth Date: _____ **Driver's License #:** _____ **State Issued:** _____

Emergency Contact Name: _____ **Relationship:** _____

Emergency Contact Phone: _____

Will this employee be driving for company business? Yes No (Must be completed)

Will this employee be entering residences? Yes No (Must be completed)

Employee Signature: _____ **Date:** _____

EMPLOYMENT EXPERIENCE

Employer Name: _____

Job Title: _____ **Hourly Pay Rate: \$** _____

Employment Dates: _____ **to** _____

Job Description: _____

Reason for Leaving: _____
