

**For Office Use Only:**

#### ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### DOH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APPLICATION FOR EMPLOYMENT**

(Please type or print with black ink)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of Application:** | | | |  | | **Position(s) Applied For:** | | | |  | | |
| **Name:** |  | | | |  | | | | | |  | |
|  | Last | | | | First | | | | | | Middle | |
| **A****ddress:** | |  | | | | | |  | | | |  |
|  | | Street: | | | | | | City / State | | | | Zip Code |
| Daytime Phone: | | | (     ) | | | | Evening Phone: | | (     ) | | | |

Have you filed an application here before?  Yes  No

Are you currently employed?  Yes  No

May we contact your current employer?  Yes  No

If employed and you are under 18 years of age, can you furnish a work permit?  Yes  No

Are you prevented from lawfully becoming employed in this country because of

Visa or Immigration Status?\*  Yes  No

What date would be available to start work?

Are you available to work?  Full-Time  Part-Time  Temporary

If part-time, number of hours available to work:

Are you currently on “layoff” status and subject to recall?  Yes  No

Can you travel, if a job requirement?  Yes  No

*\*You must be legally authorized to work and must provide employment authorization documents. Failure to do so will prevent you from being employed by LAMBERT Architecture + Interiors.*

Have you been convicted of any unlawful offense (other than a minor traffic violation)? If **Yes**, list the conviction, date, and county and state of conviction:  No  Yes

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| **Conviction** | **Date** | **County / State** |
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*(Conviction of any unlawful offense will not necessarily disqualify applicant from employment.)*

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| EDUCATION AND TRAINING | | | | |
|  | **Name and Address of School** | **Course of Study** | **Years Completed** | **Type of Degree, Diploma or Certificate Received** |
| **High**  **School** |  |  |  |  |
|  |
| **Undergraduate College** |  |  |  |  |
|  |
| **Graduate / Professional** |  |  |  |  |
|  |
| **Other**  **(Specify)** |  |  |  |  |
|  |

If applying for an Intern, Project Architect, or Project Manager position, is your degree program accredited by the National Architectural Accrediting Board (NAAB)?  Yes  No

If you are not a Registered Architect, are you actively participating in the Intern Development Program (IDP) through the National Council of Architectural Registration Boards (NCARB)?  Yes  No

If yes, how many of the Experience Hours have you satisfied to date?

Pre-Design       Design       Project Management       Practice Management

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| ADDITIONAL TRAINING: | List any coursework relevant to this position: | | |
| Fields of work for which you are licensed, registered or certified. Give date/source of issuance. | **Course** | **Hrs** | **Grade** |
|  |  |  |
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| Additional knowledge, skills, and abilities you possess that would be valuable for this position: |  |  |  |
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| List any work-related Associations, Organizations or Affiliations you belong to: |  |  |  |
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| PROFESSIONAL LICENSE / REGISTRATIONS *If necessary, use additional space below* |
| Do you currently hold an ACTIVE NCARB certification?  Yes  No |
| If yes, please provide NCARB File Number:       and NCARB Certificate Number: |
| Do you currently hold an ACTIVE license to practice architecture in the United States:  Yes  No |
| If yes, please specify State:       and provide License Number: |
| Have you ever allowed any registrations to lapse?  Yes  No If yes, was lapse in good standing?  Yes  No |
| If yes, list jurisdiction:       list registration/license number:       and explain why or why not: |
|  |
|  |
| If yes, was disciplinary action pending or threatened?  Yes  No |
| Has your registration ever been denied, suspended, or revoked?  Yes  No |
| If yes, please explain why: |
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| SPECIALIZED SKILLS: *Rate yourself according to the three point scale below for each of the Operating Systems and Computer Programs listed.* | | | |
| OPERATING **SYSTEMS** | Beginner Requires direct supervision. Can use basic functions of the software but can not work independently. | Proficient Requires minimal supervision. Mastered the basics. Needs assistance with complex and higher level functions. | Expert Can use complex and higher level functions of the software. Able to work independently with few errors. |
| Windows 7 |  |  |  |
| i-Pad |  |  |  |
| **PROGRAMS &**  **SOFTWARE** | Beginner Requires direct supervision. Can use basic functions of the software but can not work independently. | Proficient Requires minimal supervision. Mastered the basics. Needs assistance with complex and higher level functions. | Expert Can use complex and higher level functions of the software. Able to work independently with few errors. |
| Microsoft Office 2013 |  |  |  |
| Microsoft Outlook |  |  |  |
| Microsoft Word |  |  |  |
| Microsoft Excel |  |  |  |
| Microsoft PowerPoint |  |  |  |
| Microsoft Project |  |  |  |
| Sketch Up 2014 |  |  |  |
| Adobe CS Suite 3 |  |  |  |
| Adobe Acrobat 8 |  |  |  |
| AutoCAD 2010 |  |  |  |
| Revit |  |  |  |
| ArchiCAD *(version 16)* |  |  |  |
| Rhino |  |  |  |
| 3D Studio Max 2009 |  |  |  |
| AIA Contract Software |  |  |  |
| SpecLink-e |  |  |  |

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| **EMPLOYMENT RECORD:** *List your present or most recent position FIRST.* | | | | |
| **A.** | **Title of Last / Current Position:** | | | |
| Employer’s Name: | | | Starting Salary: $ |
| Employer’s Address: | | | Last/Current Salary: $ |
| Supervisor’s Name/Title: | | | Reason for Leaving: |
| Supervisor’s Phone: | | |
| Start Date:  End Date: | Mo:       Yr:  Mo:       Yr: | List major job duties/responsibilities, beginning with the most important: | |
| Full Time  Part Time | Yrs:       Mos:  Yrs:       Mos: |
|
| If part time, hrs / wk: | |
|  | | | | |
| **B.** | **Title of Previous Position:** | | | |
| Employer’s Name: | | | Starting Salary: $ |
| Employer’s Address: | | | Last/Current Salary: $ |
| Supervisor’s Name/Title: | | | Reason for Leaving: |
| Supervisor’s Phone: | | |
| Start Date:  End Date: | Mo:       Yr:  Mo:       Yr: | List major job duties/responsibilities, beginning with the most important: | |
| Full Time  Part Time | Yrs:       Mos:  Yrs:       Mos: |
|
| If part time, hrs / wk: | |
|  | | | | |
| **C.** | **Title of Previous Position:** | | | |
| Employer’s Name: | | | Starting Salary: $ |
| Employer’s Address: | | | Last/Current Salary: $ |
| Supervisor’s Name/Title: | | | Reason for Leaving: |
| Supervisor’s Phone: | | |
| Start Date:  End Date: | Mo:       Yr:  Mo:       Yr: | List major job duties/responsibilities, beginning with the most important: | |
| Full Time  Part Time | Yrs:       Mos:  Yrs:       Mos: |
|
| If part time, hrs / wk: | |
|  | | | | |
| **D.** | **Title of Previous Position:** | | | |
| Employer’s Name: | | | Starting Salary: $ |
| Employer’s Address: | | | Last/Current Salary: $ |
| Supervisor’s Name/Title: | | | Reason for Leaving: |
| Supervisor’s Phone: | | |
| Start Date:  End Date: | Mo:       Yr:  Mo:       Yr: | List major job duties/responsibilities, beginning with the most important: | |
| Full Time  Part Time | Yrs:       Mos:  Yrs:       Mos: |
|
| If part time, hrs / wk: | |

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| **REFERENCES:** *Persons other than relatives who are in a position and willing to certify to your character, ability, experience, and qualifications for the position. If you have a placement file which contains references, please have the file forwarded to us.* | | |
| **A** | Name:  Relationship: | Address: |
| Phone(s): |
| **B** | Name:  Relationship: | Address: |
| Phone(s): |
| **C** | Name:  Relationship: | Address: |
| Phone(s): |

**EQUAL OPPORTUNITY PLEDGE:** LAMBERT Architecture + Interiors is an Equal Opportunity Employer. LAMBERT reaffirms its commitment to equality of opportunity and pledges that it will not practice or permit discrimination in employment on the basis of race, color, religion, age, sex, national origin, or disability. Application will remain active for 90 days to be considered for any open positions.

**APPLICATION CERTIFICATION:** I hereby certify that all information on this Application, along with any attachments (resume, transcripts, licenses, etc.) submitted is true and complete to the best of my knowledge and belief. I understand that false or misleading information or documentation, or an omission or failure to include all relevant information may result in removal from the selection process, or termination if already hired. I also understand that this Application does not constitute a contract between myself and LAMBERT Architecture + Interiors and, if hired, that either LAMBERT Architecture + Interiors or I may terminate the employment relationship at any time, for any reason, without advance notice.

**Applicant’s Signature:** **Date:**