



## APPLICATION FOR EMPLOYMENT - PLEASE PRINT

We consider applicants for every position without regards to race, religion, sex, creed, age, disability, color, marital status, veteran status, sexual orientation or any other legal protectant status.

**POSITION (S) APPLIED FOR:** DRIVER  LABOR  EQUIPMENT OPER.  OTHER

### HOW DID YOU HEAR ABOUT US?

ADVERTISEMENT

FRIEND

WALK IN

EMPLOYMENT AGENCY

RELATIVE

OTHER

LAST NAME ↓

FIRST NAME

MIDDLE NAME

DATE

ADDRESS # ↓

STREET

CITY

STATE

ZIP CODE

TELEPHONE NUMBER ↓

SS #

D.O.B.

DRIVER'S LICENSE #

EMERGENCY CONTACT ↓

TELEPHONE NUMBER

RELATIONSHIP

If you are under the age of 18, can you provide required proof of eligibility to work?  YES  NO

Have you ever filed an application with us before?  YES  NO

If yes give date: \_\_\_\_\_

Have you ever been employed with us before?  YES  NO

If yes give date: \_\_\_\_\_

Are you currently employed?  YES  NO

If yes may we contact your present employer?  YES  NO

Are you prevented from lawfully becoming employed in this country because of visa or immigrant status?  YES  NO

On what date would you be available to start work? \_\_\_\_\_

Are you able to work  Full Time  Part Time  Temporary

Are you currently on "lay off" status and subject to recall?  YES  NO

Can you travel if the job requires it?  YES  NO

Have you been convicted of a felony in the past 7 years?  YES  NO

If yes please explain:

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

# EMPLOYMENT EXPERIENCE

Start with your present employer. Include any job, military service assignment and/or volunteer activities. You may exclude organizations which include race, color, religion, gender, national origin, disabilities or other protected status.

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1) Employer	Dates Employed To/From	Work pweformed
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Address

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Telephone Number	Hourly rate/salary Start/Final
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Job Title	Supervisor
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Reason for leaving

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2) Employer	Dates Employed To/From	Work performed
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Address

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Telephone Number	Hourly rate/salary Start/Final
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Job Title	Supervisor
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Reason for leaving

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3) Employer	Dates Employed To/From	Work performed
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Address

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Telephone Number	Hourly rate/salary Start/Final
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Job Title	Supervisor
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Reason for leaving

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## OTHER QUALIFICATIONS

Specialized Skills (Check Skills/Equipment Operator)

Loader  Bulldozer  
 Back Hoe  Roller  
 Truck ? Axle \_\_\_\_\_  Layout/Survey  
 Other \_\_\_\_\_

State any additional information you feel may qualify you for the job:

## REFERENCES

- 1) NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
ADDRESS \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_
- 2) NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
ADDRESS \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_
- 3) NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
ADDRESS \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

I certify that the answers given herein are true to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

### **FOR OFFICE USE ONLY**

ARRANGE INTERVIEW:  YES  NO  
REMARKS:

EMPLOYED  YES  NO

DATE OF EMPLOYMENT \_\_\_\_\_ JOB TITLE \_\_\_\_\_ HOURLY SALARY \_\_\_\_\_