



Employment Application

Applicant Information

Full Name: Last First M.I. Date:

Address: Street Address Apartment/Unit #

City State ZIP Code

Phone: Email

Date of Birth *: *The age discrimination in employment act of 1967 prohibits discrimination on the basis of age with respects to individuals who at least 40 years old but less than 70 years of age.

Date Available: Social Security No.: Desired Salary: \$

Position Applied for:

Are you 18 Years Old or Older? YES NO Are you authorized to work in the U.S.? YES NO
Are you currently Employed YES NO Ever applied to work for this company before? YES NO
Have you ever worked for this company? YES NO If yes, when?

Education

High School: Address:

From: To: Did you graduate? YES NO Diploma:

College: Address:

From: To: Did you graduate? YES NO Degree:

Other: Address:

From: To: Did you graduate? YES NO Degree:

List Other Training:

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

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

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

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

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

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

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

In case of Emergency Notify: _____
Name Address Phone No.

Driving & Equipment Experience

Do you have a Commercial Truck Drivers License? YES NO

If Yes, what is the Date of Issue _____

If Yes, What Classification? _____

Please List Types of Machinery or Equipment used or worked on, and appreciate total number of hours, days, weeks, months, or years of total experience per machine.

Types of Machinery or Equipment	Length of Experience (days, months, Years, etc.)

Disclaimer and Signature

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information that may have personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice."

Signature: _____ Date: _____

Do Not Write Below This Line

Interviewed By: _____ Date: _____

Hired? Y/N _____ Position _____ Wage: _____

Date Reporting To Work: _____ General Manager _____

Drug Screening: _____

Background Check: _____