



Employee Application

Applicant Information		
Last Name	First Name or Initial	Middle Name or Initial
Date of Birth ____/____/____	Can you provide documentation to verify Date of Birth? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Social Security Number ____/____/____	Home Phone Number (____) ____-____	Cell Phone Number (____) ____-____
Current Address:		How long have you lived at this address? Years Months
Email:		Date Available to Start: ____/____/____
Position Applied for:		Desired Salary: \$
Are you a citizen of the United States? <input type="checkbox"/> Y <input type="checkbox"/> N	If no, are you authorized to work in the U.S.? <input type="checkbox"/> Y <input type="checkbox"/> N	
Have you ever worked for this company? <input type="checkbox"/> Y <input type="checkbox"/> N	If yes, when?	
Have you ever been convicted of a felony? <input type="checkbox"/> Y <input type="checkbox"/> N	If yes, explain:	

License Information				
Driver Licenses	State	License Number	Type	Expiration Date

Education			
High School:		Address:	
From:	To:	Did you graduate? <input type="checkbox"/> Y <input type="checkbox"/> N	Diploma:
College:		Address:	
From:	To:	Did you graduate? <input type="checkbox"/> Y <input type="checkbox"/> N	Diploma:
Other:		Address:	

Military Service	
Branch:	From: To:
Rank at Discharge:	Type of Discharge:
If other than honorable, explain:	

References

Please list three professional references.

Full Name:	Relationship:
Company Name:	Cell Phone Number (____) _____ - _____
Address:	

Full Name:	Relationship:
Company Name:	Cell Phone Number (____) _____ - _____
Address:	

Full Name:	Relationship:
Company Name:	Cell Phone Number (____) _____ - _____
Address:	

Previous Employment

Company Name:	Phone Number (____) _____ - _____	
Address:	Supervisor:	
Job Title:	Starting Salary: \$	Ending Salary: \$
Responsibilities:		
From:	To:	Reason for Leaving:
May we contact your supervisor at this company? <input type="checkbox"/> Y <input type="checkbox"/> N		

Company Name:	Phone Number (____) _____ - _____	
Address:	Supervisor:	
Job Title:	Starting Salary: \$	Ending Salary: \$
Responsibilities:		
From:	To:	Reason for Leaving:
May we contact your supervisor at this company? <input type="checkbox"/> Y <input type="checkbox"/> N		

Company Name:		Phone Number (____) _____ - _____	
Address:		Supervisor:	
Job Title:	Starting Salary: \$	Ending Salary: \$	
Responsibilities:			
From:	To:	Reason for Leaving:	
May we contact your supervisor at this company? <input type="checkbox"/> Y <input type="checkbox"/> N			

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

Summarize Your Special Skills or Qualifications:

Please provide detailed information on the skills you have attained through past work experience. List the number of years of experience you have in each category and what type of work was done with it. Example: Truck Driver, 5 years, oversized loads, truck and trailer, low-boys, long haul, dump experience etc.

Laborer:

Dozer Operator:

Loader Operator:

Truck Driver:

Excavator/Backhoe Operator:

Skid steer Operator:

Other Types of Equipment:

Grading Experience (Years of experience, specific jobs, list of equipment)
