

**APPLICANT INFORMATION**

Last Name				First			M.I.	Date		
Present Address							Apartment/Unit #			
City				State			ZIP			
Phone				E-mail Address						
Date Available					Are you 18 years of age or older.					
Position Applied for										
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?							
Do you have a valid drivers license?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, DL#							
Do you have a CDL license?	YES <input type="checkbox"/>	NO <input type="checkbox"/>								

**REFERENCES**

*Please list three professional references.*

Full Name				Relationship			Phone			
Full Name				Relationship			Phone			
Full Name				Relationship			Phone			

**PREVIOUS EMPLOYMENT**

Company Name				Phone			
Address				Supervisor			
Job Title		Starting Salary \$		Ending Salary \$			
Responsibilities							
From		To		Reason for Leaving			
Company Name				Phone			
Address				Supervisor			
Job Title		Starting Salary \$		Ending Salary \$			
Responsibilities							
From		To		Reason for Leaving			
Company Name				Phone			
Address				Supervisor			
Job Title		Starting Salary \$		Ending Salary \$			
Responsibilities							
From		To		Reason for Leaving			

**PLEASE ANSWER THE FOLLOWING QUESTIONS**

Have you had any traffic violations in the past 5 years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain
Have you ever been convicted of a crime in the past five years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain
Can you perform essential functions of the job with or without reasonable accommodation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have you ever operated a dump truck?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain
Have you ever operated a skid-loader?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain
Willing and able to travel for occasional out-of-state work when needed?		Y E	NO <input type="checkbox"/>
Are you able to work over time?		Y E	NO <input type="checkbox"/>
When are you available to start work?			

**PLEASE LIST ANY OTHER QUALIFICATIONS YOU MIGHT HAVE.**


**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.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my pervious employment and any pertinent information they may have personal or otherwise and release all parties from all liability for any damage that may result from furnishing the 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, may be terminated at any time for any reason without any prior notice.

Signature	Date
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