

APPLICATION FOR EMPLOYMENT

HOETTE CONCRETE CONSTRUCTION COMPANY

NAME _____ BIRTH _____
 DATE _____
 mm/dd/yr

Last First Middle

CURRENT ADDRESS _____ HOW _____
 LONG?

Street City State Zip Code

ADDRESS FOR LAST THREE YEARS _____ HOW _____
 LONG?

Street City State Zip Code

_____ HOW _____
 LONG?

Street City State Zip Code

TELEPHONE _____ SOCIAL SECURITY NO. _____
 Home Cell

HAVE YOU EVER BEEN CONVICTED OF A FELONY IN THE LAST SEVEN YEARS?

(Such conviction may be relevant if job related, but may not bar employment)

IF YES, PLEASE EXPLAIN:

EMPLOYMENT HISTORY

DATES EMPLOYED	COMPANY NAME	ADDRESS	PAY RATE	JOB DESCRIPTION

EXPERIENCE AND QUALIFICATIONS - DRIVER

	STATE	LICENSE NUMBER	CLASS	EXPERATION DATE
DRIVERS LICENSE				

DRIVING EXPERIENCE

CLASS OF EQUIPMENT (ADD DESCRIPTION)	DATE OF EXPERIENCE	APPROX MILES
Straight Truck:	to	
Tractor and Trailer:	to	
Dump:	to	
Roll-Off Container:	to	

ACCIDENT HISTORY FOR LAST THREE YEARS

DATES	NATURE OF ACCIDENT	FATALITIES	INJURIES
LAST ACCIDENT			
LAST ACCIDENT			
LAST ACCIDENT			
LAST ACCIDENT			

TRAFFIC CONVICTIONS FOR LAST THREE YEARS (other than parking violations)

LOCATIONS	DATE	CHARGE	PENALTY

References:

Name: _____ Tele: _____ Yrs. Known: _____

Name: _____ Tele: _____ Yrs. Known: _____

Is there any health reasons that would restrict you from heavy lifting or pulling?

Yes _____ No _____

Education: Last Yr Completed _____ Sports _____ Yrs. _____

Transportation: Please indicate what type of vehicle.....

Year _____ Make _____ Model _____

In Case of an emergency please contact:

Name _____ Telephone: _____ Relationship _____

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. Furthermore, I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the employer has the authority to make any assurances to the contrary.

I give the employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporation or organizations for furnishing such information.

Signature of Applicant _____ Date _____