

Application for Employment
(Please Print or Type)

We have a Drug-Free Workplace Program which requires pre-employment and random drug screening.

We also require a Class A Commercial Drivers License

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, non-job related disability, or any other protected group status.

Job Applying For _____

Date _____

Name _____
(First) (Middle) (Last)

Social Security No. _____

Address _____
(Street) (City) (State) (Zip Code)

Telephone No. _____

Do you have a legal right to be employed in the United States? Yes (proof required) No

Are you over the age of 18? Yes No

Referred by: Advertisement Friend Walk-in Union Local # _____

Have you ever worked for us before? _____

List any friends or relatives working for us. _____

If hired, on what date will you be able to start work? _____

Travel is a necessity in the highway industry. If the job requires, are you willing to travel Up to 50 miles (one way)? Yes No Overnight travel, beyond 50 miles? Yes No

CHECK EQUIPMENT THAT YOU CAN OPERATE

- | | | | |
|---|--|--|--------------------------------------|
| <input type="checkbox"/> Air Compressor | <input type="checkbox"/> Curb/Gutter Machine | <input type="checkbox"/> Jackhammer | <input type="checkbox"/> Sandblaster |
| <input type="checkbox"/> Backhoe | <input type="checkbox"/> Dozer | <input type="checkbox"/> Loader | <input type="checkbox"/> Other |
| <input type="checkbox"/> Blade | <input type="checkbox"/> Dump Truck | <input type="checkbox"/> Pressure Washer | |
| <input type="checkbox"/> Concrete Saw | <input type="checkbox"/> Generator | <input type="checkbox"/> Power Screed | |

Have you ever been convicted of a crime, other than minor traffic offenses: _____

If so, please explain _____

Note: A prior conviction will not necessarily bar you from employment; however the type of conviction and when it occurred will be considered.

EDUCATIONAL BACKGROUND			
Type of School	Name & City	Did you Graduate	Course or Major
College			
Technical School			
High School			
Other			

APPRENTICESHIP OR INTERNSHIP			
What Trade or Program	Dates Served	Hours served on job	Class room hours
	to		

PRIOR WORK HISTORY					
(Present or most recent job first including Military experience if applicable)					
Dates From	To	Name of Employer	Position	Pay Rate	Reason for Leaving

May we contact your present employer? Yes No. Explain _____

APPLICANT MUST READ AND SIGN

I certify that I have read and understand all of this employment application. It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other persons named herein from all liability for any damages on account of furnishing such information. I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

I further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the employer and for no other reason.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I also understand that misrepresentation or omission of information or facts may result in my rejection or dismissal.

If hired, I agree to abide by all the rules and policies of the employer.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature

Date

REQUEST FOR CHECK OF DRIVING RECORD

I hereby authorize you to release, from time to time, the following information to _____ for purpose of investigation as required by law, including without limitation, Section 391.23 of the Federal Motor Carrier Safety Regulations. You are released from any and all liability which may result from furnishing such information.

(Applicant's Signature)

(Date)

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1. In accordance with the provisions of Section 604 and Section 607 of the Fair Credit Reporting Act, Public Law No. 91-508, I hereby certify that the information requested below will be used for a "permissible purpose" as defined in the Act, and that the information received will be used for no other purpose.
 2. I further certify that if the applicant named below is denied employment based upon the information received, I will identify the source of the report in accordance with Section 615(a) of the Fair Credit Reporting Act

(Signature of Requester)

(Date)

TO:

Cobb Strecker Dunphy & Zimmermann, Inc.
150 South Fifth Street, Suite 2000
Minneapolis, MN 55402

The following named person has made application with our company for the position of _____. Please furnish the undersigned with the applicant's driving record for the past three years.

NAME OF APPLICANT _____

ADDRESS _____
(Number & Street) (City) (State) (Zip Code)

FORMER ADDRESS _____
(Number & Street) (City) (State) (Zip Code)

DATE OF BIRTH _____

LICENSE NUMBER _____

REQUESTED BY _____

(Name and Title)