

APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE
EQUAL OPPORTUNITY EMPLOYER



DATE: _____

201 Bonita Avenue, Bradford, IL 61421
phone 309-897-8216 Fax 866-811-5248

NAME (LAST NAME, FIRST NAME)		Spouse Name
DATE OF BIRTH / /	SOCIAL SECURITY NUMBER - -	Referred By
HOME PHONE NO. ()	CELL PHONE NO. ()	E-mail Address
EMERGENCY CONTACT ()	NAME AND ADDRESS	

Current Address

Street	City	State	Zip	How Long
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EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU CURRENTLY EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	
EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?	WHEN?

EDUCATION HISTORY

NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL			
COLLEGE			
TRADE OR BUSINESS SCHOOL			

FORMER EMPLOYERS

LIST EMPLOYERS FOR THE LAST 10 YEARS

DATE (MONTH & YEAR)	NAME & ADDRESS OF EMPLOYER	POSITION	REASON FOR LEAVING
FROM			
TO			
MANAGER/SUPERVISORS NAME		PHONE NUMBER ()	
FROM			
TO			
MANAGER/SUPERVISORS NAME		PHONE NUMBER ()	
FROM			
TO			
MANAGER/SUPERVISORS NAME		PHONE NUMBER ()	
FROM			
TO			
MANAGER/SUPERVISORS NAME		PHONE NUMBER ()	

DRIVER QUALIFICATIONS

Driver Licenses	State	License Number	Type	Expiration Date

DRIVING EXPERIENCE

Class of Equipment	Type of Equipment (Van, Tank, Flat, Etc.)	Dates		Approx. # of Miles Total
		From	To	
Straight Truck				
Tractor and Semi Trailer				
Tractor - Two Trailers				
Other				

ACCIDENT RECORD FOR THE PAST 10 YEARS

Dates	Nature of Accident (Head-On, Rear-End, Upset, Etc.)	Fatalities	Injuries
Last Accident _____			
Next Previous _____			
Next Previous _____			

**TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS
(OTHER THAN PARKING VIOLATIONS)**

Location	Date	Charge	Penalty

IF THE ANSWER IS YES TO A-E BELOW, PLEASE USE THE BLANK SPACE BELOW TO GIVE DETAILS

	YES	NO
A. Have you ever been denied a license, permit or privilege to operate a motor vehicle?		
B. Has any license, permit or privilege ever been suspended or revoked?		
C. Have you ever filed for bankruptcy?		

PAST EMPLOYMENT REFERENCES

NAME	ADDRESS	PHONE NUMBER	BUSINESS	YEARS KNOWN

AUTHORIZATION

"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 and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damages that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the American with Disabilities Act (ADA) and other relevant federal and state laws.

DATE _____ SIGNATURE _____

INTERVIEWED BY _____ DATE _____

----- DO NOT WRITE BELOW THIS LINE -----

REMARKS

NEATNESS		CHARACTER		
PERSONALITY		ABILITY		
HIRED	FOR DEPT.	POSITION	WILL REPORT	SALARY/WAGES

APPROVED BY: _____
GENERAL MANAGER

JOB SKILLS AND PREFERENCES

Date: _____

Signature: _____

1.- Can you work in all types of climates from 10 degrees to 100 degrees?

2.- Are you comfortable in a hotel room or an apartment for an extended amount of time?

3.- What is the maximum height you are comfortable working at? 1-15' 15-45' 45-80' 80' plus

4.- Do you have any lifting restrictions? Yes _____ No _____

5.- Construction skills:

a.- Power tools (circle) Welder, Grinder, Drill, Hammer Drill, Skill Saw, Saws-all, Impact wrench

other: _____

b.- Operator (circle) Fork Lift, Skid steer, Boom Lift, Back Hoe, Mini Hoe, Bulldozer, Crane

Other: _____

c.- Valid vehicle driver license: Yes _____ No _____

d.- Concrete experience: Yes _____ No _____

e.- Foreman Experience: Yes _____ No _____

f.- Other:

6.- English Language ability: 1.- Fluent 2.- Some 3.- Little or none