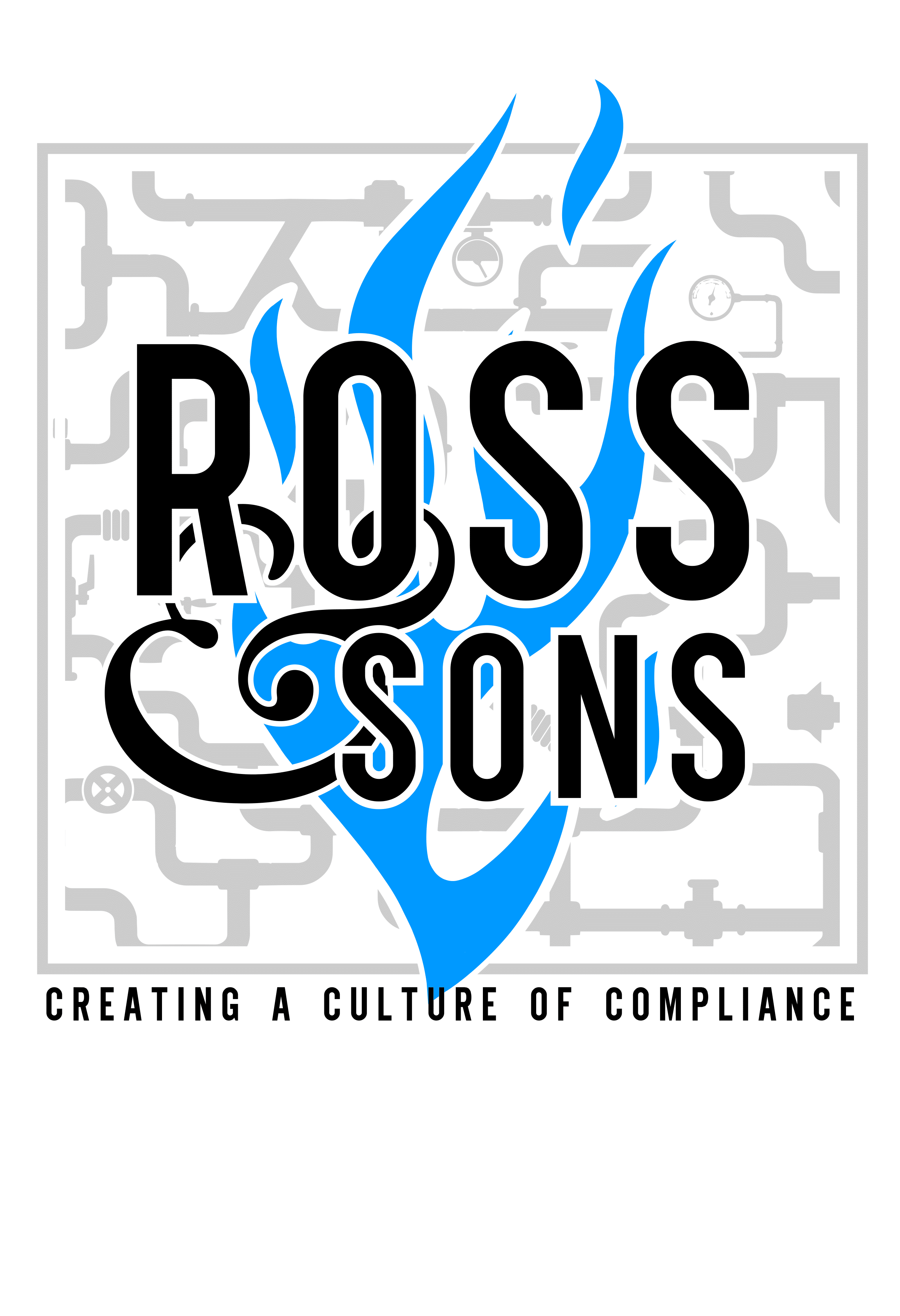
|  |  |
| --- | --- |
| Ross and sons utility contractor, inc.  Application for Employment  Ross and Sons Utility Contractor, Inc. is an equal opportunity employer. Prospective employees will receive consideration without discrimination because of race, religion, color, sex, age, national origin, or handicap. |  |



|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name |  | | | | | | | | | | | | | | | First Name | | | |  | | | | | | | | | | | | | | | | M.I. | | |  | | | | Date | | |  | | | |
| Street Address | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Apartment/Unit # | | | | | | | | |  | | | |
| City | |  | | | | | | | | | | | | | | | | | State | | | |  | | | | | | | | | | | | | | ZIP | | |  | | | | | | | | | |
| Phone | |  | | | | | | | | | | | | | | | | | Birthday | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Date Available | | | | | |  | | | | | | | | | Social Security No. | | | | | | | |  | | | | | | | | | | | | Desired Salary | | | | | | |  | | | | | | | |
| Height: | | | | | | | | | | | | | | Weight: | | | | | | | | | | | | | | | | | | | | Sex: | | | | | | | Male | | | | | | Female | | |
| Position Applied for | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you a citizen of the United States? | | | | | | | | | | | | | YES | | | | NO | | | | | | If no, are you authorized to work in the U.S.? | | | | | | | | | | | | | | | | | | | | | YES | | | | NO | |
| Have you ever worked for this company? | | | | | | | | | | | | | YES | | | | NO | | | | | | If so, when? | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| Have you ever been convicted of a felony? | | | | | | | | | | | | | YES | | | | NO | | | | | | If yes, explain | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| Do you have a valid driver’s license? | | | | | | | | | | | | | YES | | | | NO | | | | | | Do you have a CDL? | | | | | | | | | | | | | | | | | | | | | | YES | | | | NO |
| Are you available for full-time work? | | | | | | | | | | | | | YES | | | | NO | | | | | | Will you work overtime if asked? | | | | | | | | | | | | | | | | | | | | | | YES | | | | NO |
| Marital Status | | | | | | | | | | | | | Married | | | | | | | | Single | | | | | | | | Divorced | | | | | | | | | Separated | | | | | | | | Engaged | | | |
| Have you ever been bonded? | | | | | | | | | | | | YES | | | NO | | | If yes, with what company? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have you any physical defects which prevent you from performing certain jobs? | | | | | | | | | | | | | YES | | | | | NO | | | | | | If so, describe: | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have you ever received Workmen’ Compensation? | | | | | | | | | | | | | | | | YES | | | | | | NO | | | | | If so, describe: | | | | | | | | | | | | | | | | | | | | | | |
| Other special training or skills: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| How did you learn about our organization? | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Emergency Contact | | | | Name | | | | |  | | | | | | | | | | | | | | | | Phone Number | | | | | | | |  | | | | | | | | | | | | | | | | |
| Education | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| High School | | | | |  | | | | | | | | | | | | Address | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From | | |  | | | | To | | |  | Did you graduate? | | | | | | YES | | | | | | NO | | | | | | Degree | | |  | | | | | | | | | | | | | | | | | |
| College | | |  | | | | | | | | | | | | | | Address | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From | | |  | | | | To | | |  | Did you graduate? | | | | | | YES | | | | | | NO | | | | | | Degree | | |  | | | | | | | | | | | | | | | | | |
| Other | | |  | | | | | | | | | | | | | | Address | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From | | |  | | | | To | | |  | Did you graduate? | | | | | | YES | | | | | | NO | | | | | | Degree | | |  | | | | | | | | | | | | | | | | | |
| Professional Reference | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | | |  | | | | | | | | | | | | | | | | | | | | | Relationship | | | | | |  | | | | | | | | | | | | | | | | | |
| Company | | | | |  | | | | | | | | | | | | | | | | | | | | | Phone | | | | |  | | | | | | | | | | | | | | | | | | |
| Address | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Previous Employment | | | | | | | | | | | | | | | | | | | |
| Company | | |  | | | | | | | | Phone | |  | | | | | | |
| Address | |  | | | | | | | | | Supervisor | | |  | | | | | |
| Job Title | |  | | | | | | | Starting Salary | | $ | | | | Ending Salary | | | | $ |
| Responsibilities | | | | |  | | | | | | | | | | | | | | |
| From |  | | | | To | |  | Reason for Leaving | |  | | | | | | | | | |
| Were you subject to DOT drug testing? | | | | | | | | | | YES | NO | |  | | | | | | |
| Company | | |  | | | | | | | | Phone | |  | | | | | | |
| Address | |  | | | | | | | | | Supervisor | | |  | | | | | |
| Job Title | |  | | | | | | | Starting Salary | | $ | | | | Ending Salary | | | | $ |
| Responsibilities | | | | | | | | |  | | | | | | | | | | |
| From |  | | | | To | |  | Reason for Leaving | |  | | | | | | | | | |
| Were you subject to DOT drug testing? | | | | | | | | | | YES | NO | |  | | | | | | |
| Company | |  | | | | | | | | | Phone | |  | | | | | | |
| Address | |  | | | | | | | | | Supervisor | | |  | | | | | |
| Job Title | |  | | | | | | | Starting Salary | | $ | | | | Ending Salary | | | | $ |
| Responsibilities | | | | |  | | | | | | | | | | | | | | |
| From |  | | | | To | |  | Reason for Leaving | |  | | | | | | | | | |
| Were you subject to DOT drug testing? | | | | | | | | | | YES | NO | |  | | | | | | |
| Military Service | | | | | | | | | | | | | | | | | | | |
| Branch | |  | | | | | | | | | | | | From | |  | To |  | |
| Rank at Discharge | | | | | |  | | | | | | Final Date of Discharge: | | | | | | |  |
| 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 |  | | |