

# APPLICATION FOR EMPLOYMENT

## ABOUT G&R EXCAVATING CO., INC./WHITT'S WELDING & PIPELINE, INC.+

Thank you for your interest in applying for a job with our Company. Because of our commitment to offering the highest possible satisfaction to our customers, we are only interested in hiring the best. We want to have a complete understanding of your qualifications, motivations and interests, so that we can make careful and deliberate hiring decisions that will benefit both the Company and our employees. Please answer the following questions honestly, completely and thoughtfully.

We are an Equal Opportunity Employer and do not discriminate on the basis of race, color, religion, sex, national origin, age, marital status or veteran status, citizenship, genetic information, or disability.

Date of Application \_\_\_\_\_

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### PERSONAL INFORMATION

Name: \_\_\_\_\_  
Last Name First Name Middle Initial

Address: \_\_\_\_\_  
Street

City State Zip Code  
Telephone: (\_\_\_\_\_) \_\_\_\_\_ Social Security No.: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Area Code Number

If you are under 18 years of age, do you have a work permit? Yes \_\_\_\_\_ No \_\_\_\_\_

If you have ever worked under another name, please identify:

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### YOUR JOB INTERESTS

Position Desired: \_\_\_\_\_ Date you can start work: \_\_\_\_\_

What starting salary or wage do you expect: \$\_\_\_\_\_/hr \$\_\_\_\_\_/wk \$\_\_\_\_\_/month

Are you available for full-time work? Yes \_\_\_\_\_ No \_\_\_\_\_ Are you available for part-time work: Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to work any shift: Yes \_\_\_\_\_ No \_\_\_\_\_

Are there any days of the week when you would not be available to work? Please specify: \_\_\_\_\_

How did you learn of this job opening? \_\_\_\_\_

Have you ever worked for this Company before? Yes \_\_\_\_\_ No \_\_\_\_\_

When? \_\_\_\_\_ Who was your supervisor? \_\_\_\_\_

Why did you leave? \_\_\_\_\_

Do you know anyone who works here? Yes \_\_\_\_\_ No \_\_\_\_\_ Who? \_\_\_\_\_

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### YOUR EDUCATION AND TRAINING

Please Circle Highest Grade Completed:

1 2 3 4 5 6 7 8 9 10 11 12 1 2 3 4 5 1 2 3 4

Grade School High School College Trade/Tech

What was the last school you attended? \_\_\_\_\_

What extracurricular activities did you participate in, or special skills did you acquire, at the above-circled school(s) which might be helpful for the job in which you are applying? \_\_\_\_\_

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### YOUR WORK EXPERIENCE

Beginning with your present or more recent employer, describe your employment experiences below:

Are you presently employed? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you on layoff and subject to recall? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, to where? \_\_\_\_\_

3. **Next Previous Employer:** \_\_\_\_\_

Address: \_\_\_\_\_

Kind of Business: \_\_\_\_\_ Phone: \_\_\_\_\_

Starting Position: \_\_\_\_\_ Pay: \$ \_\_\_\_\_

Final Position: \_\_\_\_\_ Pay: \$ \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Name & Title of Supervisor: \_\_\_\_\_  
month/year month/year

Description of Your Work and Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Will you receive a satisfactory reference from this employer? Yes \_\_\_\_\_ No \_\_\_\_\_ If "No," please explain: \_\_\_\_\_

4. Next Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

5. Next Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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#### PERSONAL INFORMATION

Do you have, or have you applied for the legal right to remain permanently and work in the United States?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been discharged or asked to resign by an employer? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

***A record of criminal conviction will not necessarily be a bar to employment, since the Company will consider factors such as age, time of the offense, the nature and seriousness of the violation, and the evidence of rehabilitation in making any employment decision.***

Have you ever been convicted of a crime, other than minor traffic violations? Yes \_\_\_\_\_ No \_\_\_\_\_

If your answer is yes, please explain: \_\_\_\_\_

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Please complete this section only if the job for which you are applying might require you to drive Company vehicles.

Do you have a valid driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_

License number and state: \_\_\_\_\_

Have you had any accidents in the last five years? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please give details: \_\_\_\_\_

Has your driver's license ever been suspended, revoked, denied or cancelled? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

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#### YOUR MILITARY EXPERIENCE

***Completing this section of the application is optional. Leave this area blank if you do not wish to answer.***

Have you ever been in the United States Armed Services?

Yes \_\_\_\_\_ No \_\_\_\_\_ What branch? \_\_\_\_\_

Describe any skills you acquired in the Service which would be useful to the job for which you are applying: \_\_\_\_\_

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#### YOUR REFERENCES

List the names of any professional or personal character references who have known you for the last three years and from whom you can obtain letters of recommendation. Please do not list relatives:

1. Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

2. Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

3. Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

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**PLEASE READ THE FOLLOWING PARAGRAPHS CAREFULLY**

By signing below, I certify that I have read, understand and agree to each of the following statements:

All of the information I have supplied on this application is true, accurate and complete, to the best of my knowledge, and I have not knowingly withheld any information that, if known to the Company, would affect my application unfavorably.

If I am hired by the Company, and if the Company discovers at any time during my employment that any of the statements or answers on this application are false, misleading, or incomplete, I may be dismissed immediately from my job.

This employment application will be considered only if it is submitted in response to a current job opening. If I want to be considered for a future job opening with the Company, I must fill out another application in response to that opening.

If offered a position, I agree to submit to post-offer pre-employment testing for drugs or alcohol prior to beginning work with the Company, and understand that a positive test will form the basis for rescission of any job offer. I understand that if I am employed by the Company, I may be required, when job related and consistent with the Company's business needs, to undergo a medical examination or testing for alcohol. I further understand that I may be required to submit to a test for the use of illegal drugs at any time.

In consideration of my employment with the Company, I agree to abide by all the Company's rules and regulations.

I understand that nothing in this employment application creates a contract of employment between me and the Company. If I am hired by the Company, my employment and compensation are "at will," which means that my employment can be terminated, either by the Company or me, with or without cause, and with or without notice. I understand that no manager or supervisor has the authority to make any employment agreement with me, either orally or in writing, which is not an at-will agreement. Only the President of the Company has the authority to enter into an employment agreement with me for any specified period of time.

I agree to release to the Company or its designated agents all medical information, including but not limited to files, reports, x-rays, evaluations, and opinions held by medical personnel, to the extent such information is job-related and consistent with the Company's business needs. I acknowledge that this is a general release and that if hired, it remains in effect for the duration of my employment.

In the event of my personal indebtedness to the Company, I authorize the Company to withhold from my wages, including any last paycheck, such amounts as permitted by law to satisfy my obligation to the Company.

**READ CAREFULLY BEFORE SIGNING:**

I understand and agree that any causes of action or claims that I may have or bring against the Company, or that the Company may have or bring against me, shall be commenced within the applicable statute of limitations period, within six (6) months of my knowledge of such claim or cause of action, or within six (6) months after my separation from employment, whichever is earlier.

I give the Company my permission to conduct any investigation regarding the information contained in my employment application, which the Company thinks is necessary to determine my qualifications for assuming a job with the Company. I give the Company my permission to contact any former employer, school, college or university, utility company, credit or finance bureau or office, any personal or professional reference, or any other appropriate source or individual for the purpose of gathering any information, personal or otherwise, that such sources may have about my character, general reputation, credit, education, or employment record, and I give my consent to any such source to release to the Company whatever information they have about me. I also unconditionally release all named and unnamed sources from any and all liability that might result from furnishing any information about me.

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Date

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Signature