



Job Application

PO Box 646 Phone: 715-223-6331
 Abbotsford, WI 54405 Fax: 715-223-6351

Personal Information

Last	First	MI	SS#	Email	
Street Address	City	ST	Zip	Home Phone	Cell Phone
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have a valid Drivers License <input type="checkbox"/> Yes <input type="checkbox"/> No	
Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have a valid CDL? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes list Classes & Endorsements below	
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No	Branch	Discharge Date	Rank		
What position are you applying for?			How did you hear about this position?		
Expected Hourly Rate	Date Available	Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No	Name(s) of relatives or friends working for us other than your spouse.		

Prior Work Experience

	Current or Most Recent	Previous Employer #2	Previous Employer #3
Employer			
Address			
City, ST, ZIP			
Telephone			
Name of Supervisor			
Dates of Employment	From To	From To	From To
Position/Job Title			
Pay			
Reason for Leaving			
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Trucks & Equipment Operated

List years of experience operating each type of equipment below & any specific training for each.

	Make/Model	Years Exp	Specific training or experience
Semi			
Dump Truck			
Redi Mix Truck			
Endloader			
Backhoe			
Bull Dozer			
Other			



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Driving Record

Have you ever received an award for safe driving? Yes No If yes from whom?

List any accidents you have been involved in the past 3 years.

	Date	Nature of Accident	Injuries
Last Accident			
Previous Accident			

List any driving related convictions in the past 10 years. You do not need to disclose any expunged or sealed convictions.

Essential Functions

Below are some of the essential functions of the job. Please indicated if you can perform these functions with or without reasonable accomodations.

** Lift & carry up to 40 lbs frequently. Yes No ** Frequent use of foot/feet to operate foot pedal/s on equipment and trucks Yes No

** Frequent climbing, reaching, twisting and sitting while operating equipment and trucks Yes No

** Exposure to bright lights, extreme temperatures, loud noise, dust, gas and/or fumes Yes No

If you checked no on any above, please list the accomodation required.

Education

	Name/Location	Dates	Degree	Major or Emphasis
High School				
College				
Trade/Driving/ Operating School				
List any applicable special skills, training or proficiencies.				

Personal References

	Reference 1	Reference 2	Reference 3
Name			
Address			
City, ST, ZIP			
Telephone			

Signature

The information provided in this application for employment is true and complete. If employed, and misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I also provide consent for former employers to be contacted regarding work records.

Signature	Date
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