

Position(s) applied for or type of work desired: \_\_\_\_\_

Type of employment desired: \_\_\_\_\_ (Permanent or Part-Time)

## **Burton Excavating, Inc.**

1396 E. Easterday Avenue, Sault Ste. Marie, MI 49783

### **Application for Employment**

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Date you will be available to start work: \_\_\_\_\_

Are you available for snowplowing (day or night) if necessary? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you willing to work overtime if necessary? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you submit proof of legal employment authorization? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you are under 18, can you furnish a work permit? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you pass the pre-employment drug test? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been convicted of a crime in the last 7 years? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain (a conviction will not automatically bar employment): \_\_\_\_\_

Please indicate your drivers license number: \_\_\_\_\_

Do you have a valid CDL and what class: \_\_\_\_\_

### **Employment History**

Please provide all employment information for your past employers starting with the most recent.

Employer: \_\_\_\_\_ Position Held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate Supervisor and title: \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Hourly Pay Rate: \_\_\_\_\_

Job Summary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Position Held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate Supervisor and title: \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Hourly Pay Rate: \_\_\_\_\_

Job Summary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Position Held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate Supervisor and title: \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Hourly Pay Rate: \_\_\_\_\_

Job Summary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## Other Skills and Qualifications

Summarize any job training, skills, licenses, certificates, and/or other qualifications, even if they are not related to position applied for:

---

---

---

---

---

---

---

## Educational History

List school name and location, years completed, course of study, and any degrees earned:

High School: \_\_\_\_\_

College: \_\_\_\_\_

Technical Training: \_\_\_\_\_

Other: \_\_\_\_\_

## References

List 3 references names, telephone numbers, and years known (do not include relatives):

---

---

---

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institution, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons and organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment or specified amount of works hours as excavating is based on amount of work and snowplowing is based on amount of snowfall, and that this application does not constitute an agreement or contract of employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

**I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_