



P.O Box 853  
 Lovell, WY 82431  
 (307) 548-6155 phone  
 (307) 548-7723 fax

|                  |       |                           |      |
|------------------|-------|---------------------------|------|
| Last Name        | First | Middle                    | Date |
| Street Address   |       | Home Telephone<br>( )     |      |
| City, State, Zip |       | Business Telephone<br>( ) |      |

\*If at the above residence less than three years, list all residences for the past three years. Attach a separate sheet if necessary.

|        |      |       |     |
|--------|------|-------|-----|
| Street | City | State | Zip |
| Street | City | State | Zip |

|  |  |
|--|--|
| Have you ever applied for employment with us?<br><input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Month and Year _____<br><br>Have you ever worked for this company under another name? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If so, under what name? _____<br><br>Pay Expected: _____ | Names of any relatives employed by this company:<br>_____<br><br>Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If not, how long since leaving last employment? _____ |
|--|--|

**EDUCATION**

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College: 1 2 3 4  
 Degree Awarded: \_\_\_\_\_  
 Last school attended \_\_\_\_\_  
 Name Address

**GENERAL**

Have you ever been bonded?  Yes  No Name of Bonding Company: \_\_\_\_\_  
 (Answer only if a job requirement)  
 Have you ever been convicted of a felony?  Yes  No  
 If yes, please explain fully on a separate sheet of paper. Conviction of a crime is not an automatic bar to employment – all circumstances will be considered.

**ALL APPLICANTS FILL OUT**

**Driver Experience & Qualification**

Date of Birth \_\_\_\_\_ The U.S. Department of Transportation requires that driver applicants state their date of  
 (month/day/year) birth (391.21 (b)(2))  
 Social Security No. \_\_\_\_\_  
 Signature of Applicant: \_\_\_\_\_

| <b>Driver Experience &amp; Qualification</b>                             |   |       |  |                 |
|--|---|-------|--|-----------------|
| <b>Driver's License held in the past 3 years must be shown.</b>          |   |       |  |                 |
| State  | License No.   | Class | Endorsement(s)   | Expiration Date |
|  |   |       |  |                 |
|  |   |       |  |                 |
|  |   |       |  |                 |
| A.   | Have you ever been denied a license, permit, or privilege to operate a motor vehicle?           |       | <input type="checkbox"/> Yes <input type="checkbox"/> No |                 |
| B.   | Has any license, permit, or privilege ever been suspended or revoked?                           |       | <input type="checkbox"/> Yes <input type="checkbox"/> No |                 |
| C.   | Have you ever been disqualified for violations of the Federal Motor Carrier Safety Regulations? |       | <input type="checkbox"/> Yes <input type="checkbox"/> No |                 |
| If you answered yes to A, B, or C, attach a statement providing details. |   |       |  |                 |

| <b>Driving Experience: For applicants applying for a driving position</b> |  |           |         |                         |
|---|--|-----------|---------|-------------------------|
| Class of Equipment  | Type of Equipment<br>(Van, Tank, Flat, Etc.) | Date From | Date To | Approximate Total Miles |
| Straight Truck  |  |           |         |                         |
| Tractor & Semi-Trailer  |  |           |         |                         |
| Twin Trailers – LVC's   |  |           |         |                         |
| Other   |  |           |         |                         |
| List states operated in during the last five years: _____                 |  |           |         |                         |
| List special courses or training that will help you as a driver: _____    |  |           |         |                         |
| List driving awards held and who awards were presented by: _____          |  |           |         |                         |

| <b>ALL APPLICANTS:<br/>Accident and/or Motor Vehicle Violation Review for the past 3 years: (Attach separate sheet of paper if more space is needed)</b> |  |            |          |
|--|--|------------|----------|
| Dates  | Nature of accident or violation<br>(Head-on, Rear-end, Overturn, etc.) | Fatalities | Injuries |
|  |  |            |          |
|  |  |            |          |
|  |  |            |          |

| <b>EMPLOYMENT RECORD – ALL APPLICANTS</b>   |         |                           |                         |
|---|---------|---------------------------|-------------------------|
| Start with last or current position, including military experience, and work back. Attach a separate sheet of paper if necessary.   |         |                           |                         |
| The U.S. Department of Transportation requires that driver applications show all employment for the past three years. Effective July 1987, the driver must also show commercial driver employment for the seven years immediately preceding this year period. 391.2(B)(10), (11). |         |                           |                         |
| <b>PLEASE FILL IN COMPLETE MAILING ADDRESS FOR EACH EMPLOYER</b>  |         |                           |                         |
| Current Employer:   |         | Supervisor's Name:        |                         |
| Address:  |         | Phone: ( )                |                         |
| Position Held:  | Salary: | From: _____<br>Month/year | To: _____<br>Month/year |
| Reason for leaving:   |         |                           |                         |

|                     |         |                           |                         |
|---------------------|---------|---------------------------|-------------------------|
| Previous Employer:  |         | Supervisor's Name:        |                         |
| Address:            |         | Phone: ( )                |                         |
| Position Held:      | Salary: | From: _____<br>Month/year | To: _____<br>Month/year |
| Reason for leaving: |         |                           |                         |

# EMPLOYMENT APPLICATION

**GK Construction, Inc.**

|  |         |                           |                         |
|--|---------|---------------------------|-------------------------|
| Previous Employer:                                 |         | Supervisor's Name:        |                         |
| Address:   |         | Phone: (   )              |                         |
| Position Held:                                     | Salary: | From: _____<br>Month/year | To: _____<br>Month/year |
| Reason for leaving:                                |         |                           |                         |
| <b>MAINTENANCE EXPERIENCE &amp; QUALIFICATIONS</b> |         |                           |                         |
| List courses and training in maintenance work:     |         |                           |                         |
|  |         |                           |                         |
|  |         |                           |                         |
| Job Function:                                      |         |                           |                         |

| Indicate training & experience in the following | Formal Training (check) | Years of Experience | Area                    | Formal Training (check) | Years of Experience |
|---|-------------------------|---------------------|-------------------------|-------------------------|---------------------|
| Drive Line Components                           |                         |                     | Body Work               |                         |                     |
| Diesel Engine Tune-Up & Rebuild                 |                         |                     | Electrical Repair       |                         |                     |
| Gas Engine Tune-Up & Rebuild                    |                         |                     | Frame & Wheel Alignment |                         |                     |
| Tire Service                                    |                         |                     | Brakes                  |                         |                     |
| Trailer Repair                                  |                         |                     | Cooling System          |                         |                     |
| Air Conditioning                                |                         |                     | Inspections             |                         |                     |
| General Car Repair                              |                         |                     |                         |                         |                     |

| <b>SHOP EQUIPMENT</b>                           |                         |                     |                                |                         |                     |
|---|-------------------------|---------------------|--------------------------------|-------------------------|---------------------|
| Indicate training & experience in the following | Formal Training (check) | Years of Experience | Area                           | Formal Training (check) | Years of Experience |
| Electrical Diagnostic Equipment                 |                         |                     | Time Servicing Machine         |                         |                     |
|   |                         |                     | Wheel & Tire Balancing Machine |                         |                     |
|   |                         |                     | Tire Recapping Mold            |                         |                     |
| Sheet Metal Equipment                           |                         |                     | Engine Dynamometer             |                         |                     |
| Frame & Axle Straightening Equipment            |                         |                     | Chassis Dynamometer            |                         |                     |
| Engine Rebuilding                               |                         |                     | Magnetic Crack Defector        |                         |                     |
| Electric Welder                                 |                         |                     | Diesel Injection Equipment     |                         |                     |
| Oxyacetylene Welder                             |                         |                     | Engine Analyzer                |                         |                     |
| Paint Spray Gun                                 |                         |                     | Noise Measuring Equipment      |                         |                     |
| Air Conditioning                                |                         |                     | Smoke Measuring Equipment      |                         |                     |
| Inspections                                     |                         |                     | General Car Repair             |                         |                     |

| <b>HEAVY EQUIPMENT EXPERIENCE (Check all applicable)</b>             |                                 |                                   |                                |                                   |                                |
|--|---------------------------------|-----------------------------------|--------------------------------|-----------------------------------|--------------------------------|
| Equipment Type   | Loader <input type="checkbox"/> | Scrapper <input type="checkbox"/> | Dozer <input type="checkbox"/> | Back-Hoe <input type="checkbox"/> | Other <input type="checkbox"/> |
| Years Experience   | Yr.      Mo.                    | Yr.      Mo.                      | Yr.      Mo.                   | Yr.      Mo.                      | Yr.      Mo.                   |
| <b>PLATFORM EXPERIENCE &amp; QUALIFICATIONS</b>                      |                                 |                                   |                                |                                   |                                |
| List types of platform experience, equipment & number of years each: |                                 |                                   |                                |                                   |                                |
| List courses or training:  |                                 |                                   |                                |                                   |                                |

**APPLICANT MUST READ AND SIGN**

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, non-job related disability, or any other protected group status.

I certify that I have read and understood all of this employment application. It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other persons named herein from all liability for any damages on account of furnishing such information. I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

I further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the employer and for no other reason. It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91.508, I have been told that this investigation may include an investigative Consumer Report, including information regarding my character, general reputation, personal characteristics, and mode of living. I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I also understand that misrepresentation or omission of information or facts may result in my rejection or dismissal. If hired, I agree to abide by all the rules and policies of the employer.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

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Date

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Applicant Signature