



## EMPLOYMENT APPLICATION

### Job Interest Information

How were you referred to us? \_\_\_\_\_

Date Applied: \_\_\_\_\_ What date are you available to start? \_\_\_\_\_

Type of employment desired? \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary \_\_\_\_\_ Seasonal

For what position are you applying? (circle one) Laborer Operator Foreman Truck Driver Mechanic

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

Summarize your skills and qualifications for this position: \_\_\_\_\_

### Applicant Information

Full Name: \_\_\_\_\_  
(Last) (First) (MI)

Address: \_\_\_\_\_  
(City) (State) (Zip)

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Email Address/Other Contact Info: \_\_\_\_\_

Social Security #: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Driver's License #: \_\_\_\_\_ DL State: \_\_\_\_\_ DL Expiration: \_\_\_\_\_

**Be prepared to provide your SS card and Driver's License for McKinney Excavating to copy and keep on file.**

*Answering "yes" to the following questions does not constitute an automatic rejection of employment. Your response including the reasoning, rehabilitation, and/or offense/nature of any violations will be taken into consideration.*

If you are under 18 and we require a work permit, can you furnish one? (circle one) Yes No

If no, please explain: \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you ever worked for this company? (circle one) Yes No If yes, when? \_\_\_\_\_

If yes, reason for leaving? \_\_\_\_\_

Are you a citizen of the United States? (circle one) Yes No If not, do you have work papers? Yes No

"Over 40 Years Of Changing The World Around You"

Office (423) 649-0081

PO Box 529 Athens, TN 37371

Fax (423) 649-0083

Is there any reason you would not be able to work on Saturdays? (circle one)    Yes    No

If yes, please provide date(s) and/or a reason: \_\_\_\_\_

Have you sustained any physical, mental, or emotional injuries that would prevent you from performing tasks including (but not limited to) lifting, climbing, sitting, or standing for 8-10 hours a day? (circle one)    Yes    No

If yes, please provide a reason: \_\_\_\_\_

Have you ever pled "guilty" or "no contest" to or been convicted of a crime? (circle one)    Yes    No

If yes, please provide date(s) and details: \_\_\_\_\_

\_\_\_\_\_

## Education

High School: \_\_\_\_\_ City/State: \_\_\_\_\_

Number of years completed: \_\_\_\_\_ Did you graduate? (circle one)    Yes    No    Year: \_\_\_\_\_

College/University: \_\_\_\_\_ City/State: \_\_\_\_\_

Number of years completed: \_\_\_\_\_ Did you graduate? (circle one)    Yes    No    Year: \_\_\_\_\_

Major/Program: \_\_\_\_\_ GPA/Certifications: \_\_\_\_\_

Other School/Program: \_\_\_\_\_ City/State: \_\_\_\_\_

Number of years completed: \_\_\_\_\_ Did you graduate? (circle one)    Yes    No    Year: \_\_\_\_\_

Major/Program: \_\_\_\_\_ GPA/Certifications: \_\_\_\_\_

Do you hold a certification or license for any task/job relevant to the position for which you are applying?  
If so, please list the information below including expiration dates if any. (i.e. OSHA 10, CDL)

\_\_\_\_\_  
\_\_\_\_\_

## Previous Employment (begin with most recent)

1. Employer: \_\_\_\_\_ City/State: \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Salary: Start \_\_\_\_\_ End \_\_\_\_\_

Supervisor/Title: \_\_\_\_\_ Phone: \_\_\_\_\_

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

May we contact this employer for a reference? (circle one)    Yes    No

2. Employer: \_\_\_\_\_ City/State: \_\_\_\_\_  
Position(s) Held: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Salary: Start \_\_\_\_\_ End \_\_\_\_\_  
Supervisor/Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
May we contact this employer for a reference? (circle one)    Yes    No

3. Employer: \_\_\_\_\_ City/State: \_\_\_\_\_  
Position(s) Held: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Salary: Start \_\_\_\_\_ End \_\_\_\_\_  
Supervisor/Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
May we contact this employer for a reference? (circle one)    Yes    No

### References

Please provide the following information for two people to whom you are not related and by whom you have not been employed.

1. Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_  
Years known: \_\_\_\_\_ Phone: \_\_\_\_\_ City/State: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_  
Years known: \_\_\_\_\_ Phone: \_\_\_\_\_ City/State: \_\_\_\_\_

I certify that my answers are true and complete to the best of my knowledge.

I authorize you to make such investigations and inquiries of my personal, educational, employment, medical, and financial history as well as other related matters as may be necessary for a decision about my employment. I hereby release employers, schools, and other persons from all liability in responding to inquiries in connection with my application.

In the event that I am employed, I understand that false or misleading information given in my application and/or interview(s) may result in discharge.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_