



13271 Scott Hwy  
Helenwood, TN 37755  
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423-569-4084 (fax)  
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# JOB APPLICATION

TENNESSEE DRUG FREE WORKPLACE

Please print all information

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

Address: \_\_\_\_\_  
Street address Apt/Unit  
\_\_\_\_\_  
City State Zip code

Telephone number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Gender:  Male  Female

Social Security number: \_\_\_\_\_

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

Do you have transportation to get to a job site?  Yes  No

Have you ever been employed by us before?  Yes  No

Are you currently employed?  Yes  No

May we contact your present employer?  Yes  No

Are you 18 years or older?  Yes  No

Are you prevented from lawfully becoming employed in this country due to visa  Yes  No

or immigration status? *(Proof of citizenship or immigration status is required upon employment)*

You are available to work  Full time  Part time  Temporary

Date you can begin work: \_\_\_\_\_ Position you are applying for: \_\_\_\_\_

What benefits do you can you bring to the company if hired? \_\_\_\_\_

Have you been convicted of a crime within the last seven (7) years?  Yes  No

If yes, please explain: \_\_\_\_\_

## EDUCATION

School Address	Credits Earned	Major	Diploma/Degree
High School:			
College:			
Technical/Other:			

List below all present and past employment, beginning with your most recent. All times must be accounted for whether employed or not. Attach an additional sheet if necessary.

Name and Address of Company and Type of Business	From		To		How was position obtained	Describe in detail work you did and your title	Weekly Start Salary	Weekly End Salary	Reason for Leaving	Name, Title and Phone Number of Your Supervisor
	MO	YR	MO	YR						

Describe in detail any Specialized Training, Computer or Office Equipment Skills, Certifications, Licenses or On-The-Job Training programs you have completed:

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## LICENSES AND CERTIFICATIONS :

Please list any licenses or certifications held and the dates obtained: (CDL, Skilled Trade License, etc.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

**CRAFT RELATED EXPERIENCE :**

	<u>LIST</u> <u>YEARS</u>		<u>LIST</u> <u>YEARS</u>		<u>LIST</u> <u>YEARS</u>		<u>LIST</u> <u>YEARS</u>
Backhoe	_____	Front End Loader	_____	Motor Grader	_____	Raker	_____
Carpenter	_____	Skid Steer	_____	Oiler	_____	Roller	_____
Crane	_____	Ironworker (Reinf.)	_____	Painter	_____	Scraper	_____
Dozer	_____	Ironworker (Str.)	_____	Paving Machine	_____	Surveying	_____
Excavator	_____	Laborer (Semi-skilled)	_____	Pile driver	_____	Tractor	_____
Finisher (Paving)	_____	Laborer (Unskilled)	_____	Pipe layer	_____	Truck Driver	_____
Finisher (Structure)	_____	Mason	_____	Plant Operator	_____	Single Axle	_____
Foreman	_____	Mechanic	_____	Plumber	_____	Tandem Axle	_____
						Welder	_____

**PERSONAL REFERENCES :**

Name: \_\_\_\_\_ Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City/ State/ Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Company \_\_\_\_\_ Phone: \_\_\_\_\_

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

City/ State/ Zip: \_\_\_\_\_

**DISCLAIMER AND SIGNATURE**

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In Case of Emergency, notify \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone no. \_\_\_\_\_

# NOTICE

We are committed to a drug-free workplace

**ALL JOB APPLICANTS AND EMPLOYEES  
ARE SUBJECT TO DRUG TESTING**

**\*Illegal Use or Possession  
of**

**Drugs or Alcohol**

**May Lead to**

**Denial of Employment,**

**Termination,**

**and/or**

**Loss of Workers' Compensation Benefits!**

**\*T.C.A. Section 50-9-100 et. seq.**

