



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: _____