AJ Letourneau Inc.

Employment Application



Application information

Full name:					Date:
	Last	Firs	st	M.I.	
Address:					Phone:
	Street address Apt/U				
-					Email:
	City		State	Zip Code	
Date Available to start:		S.S. no:			Desired Hourly Wage \$
Position applied fo	r:				
Were you referred anyone?	by				
Are you a citizen of	f the United States?	If no	, are you authoriz	zed to work in	the U.S.?
Are you at least 18	Byears of age.				
Have you aver were	lead for this		f yes,		To
Have you ever wor company?	ked for this	`	when? From:		То
			Position Held	& site?	
Have you ever bee	n convicted of a felony?		If yes, ex	plain?	
Driving Inforn	nation				
Do you hold a valid License?	Driver's		Class		Endorsements?
Do you have any re	estrictions?		If yes, explain?		
	I a positive test recorded ir				
the Clearinghouse			lf <u>y</u>	yes, explain?	
What Type of truck have experience o	s or equipment do you perating?				

Education

High school:			Address:					
From:	To:	Did you	u graduate?		Diploma:			
College:			Address:					
From:	To:	Did you	u graduate?		Degree:			
Other:			Address:					
From:	То:	Did you	u graduate?		Degree:			
Previous Employme	ent							
Company:				Phone:				
Address:				Supervisor:				
Job title:				From:		To:		
Responsibilities:								
Reason for Living								
May we contact your previous supervisor for a reference?								
Company:				Phone:				
Address:				Supervisor:				
Job title:				From:		To:		
Responsibilities:								
Reason for Living								
May we contact your previous supervisor for a reference?								
Company:				Phone:				
Address:				Supervisor:				
Job title:				From:		То:		
Responsibilities:								
Reason for Living								

May we contact your previous supervisor for a reference?

References

Please list three professional references.								
Full name:	Relationship:							
Company:	Phone:							
Address:	Email:							
Full name:	Relationship:							
Company:	Phone:							
Address:	Email:							
Full name:	Relationship:							
Company:	Phone:							
Address:	Email:							
Military Service								
Branch:	From:	To:						
Rank at discharge:	Type of discharge:							
If other than honorable, explain:								
Is there anything about yourself you would like to know? (Training, certifications, special skills, etc.)								
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.								
Signature:		Date:						