



## **APPLICANT INSTRUCTIONS**

### **HUMAN RESOURCES & MANAGEMENT**

**3103 W. County Road 137, Midland, Texas 79706**

**(p) 432-353-3163 (p) 432-967-9961 (email) [office@triplegserviceswtx.com](mailto:office@triplegserviceswtx.com)**

1. Applications are accepted for vacant positions **only**.
2. Resumes will not be accepted as a substitute for applications, but may be attached for additional information. Please do not write "see resume" for completing any portion of the application.
3. In order for your application to be considered complete, you must answer all questions in this application. **AN INCOMPLETE APPLICATION WILL NOT BE CONSIDERED.** If a question does not apply indicate "N/A" for non-applicable.
4. Applications and attachments, once submitted, become the property of **Triple G Containers & Services, LLC** and will not be returned to the applicant.
5. The information you provide on this application should clearly reflect your suitability to the position you are applying for. Your employment record, position-related educational requirements, skills, knowledge, abilities, qualifications, and experience will be evaluated based upon the information you provide in this application.
6. Any information that you provide in this application, accompanying documents, and/or give verbally to **Triple G Containers & Services, LLC** is subject to verification. Falsification, misrepresentation, or omissions of fact may be grounds for rejection of your application, or subsequent termination of employment if hired.
7. A comprehensive pre-employment reference and background screening will be conducted on all applicants as permitted by law. (Original signatures are required on background form.)
8. This application becomes public record and is subject to disclosure in accordance with the Texas Government Code Ann. § 552-Public Information Act.
9. Applications must be received by Human Resources.
10. Applications may be e-mailed or in person to Human Resources at **[office@triplegserviceswtx.com](mailto:office@triplegserviceswtx.com)**
11. Please contact us for an in person application via phone or email between the hours of 8:00 a.m. and 4:00 p.m., Monday – Friday.
12. Due to the volume of applications received, we are unable to advise applicants as to the status of their application. If your application meets the required qualifications for the position you are applying for, it will be forwarded to the respective department. A department representative will then contact you if they are interested in interviewing you. Thank you for your interest in employment with **Triple G Containers & Services, LLC**. **Federal and State laws prohibit discrimination in employment practices because of race, color, religion, sex, age, national origin, or disability. Triple G Containers & Services, LLC is An Equal Opportunity Employer.**

**UPON RECEIVING A CONDITIONAL OFFER OF EMPLOYMENT, ALL APPLICANTS ARE SCREENED FOR THE PRESENCE OF ILLEGAL DRUGS.**

## **AUTHORITY TO RELEASE INFORMATION**

To: Whom it may concern;

I hereby authorize any authorized representative of **Triple G Containers & Services, LLC** bearing this release, or copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment records or educational records including, but not limited, to achievement, attendance, personal history, and disciplinary records and credit records. I understand that in conjunction with the processing of this application, a comprehensive background investigation will be conducted. I further understand that the investigation will be confidential in its nature and designed so as to thoroughly and completely explore my personal background. I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of **Triple G Containers & Services, LLC** Office. Consent is granted for the **Triple G Containers & Services, LLC** Office to furnish such information, as is described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as the custodian of such records, and employer, educational institution, or credit bureau or consumer reporting agency, including its officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind; which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any question as to the validity of this release, you may contact me as indicated below.

**I hereby authorize release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer to Triple G Containers & Services, LLC. This release is in accordance with DOT Regulation 49 CFR Part 40.25. I understand that information to be released is limited to the following DOT-regulated testing items: 1.) Alcohol tests with a result of 0.04 or higher; 2.) Verified positive drug tests; 3.) Refusals to be tested; 4.) Other violations of DOT agency drug and alcohol testing regulations; 5.) information obtained from previous employers of a drug and alcohol rule violation; 6.) Documentation, if any, of completion of the return-to-duty process following a rule violation.**

Signature: \_\_\_\_\_

Full Name: \_\_\_\_\_  
(print full name)

Date: \_\_\_\_\_

Complete Current Address: \_\_\_\_\_

Telephone Number: Alternate Number: \_\_\_\_\_

Social Security \_\_\_\_\_



## APPLICATION FOR EMPLOYMENT RECORD OF APPLICANT

Date: \_\_\_\_\_

Notice: If the space provided is not sufficient for complete answers or you wish to furnish additional information, attach sheets of the same size and number answers to correspond with question.

### I. PERSONAL HISTORY

Full Name: \_\_\_\_\_  
*Last Name First Name Middle Name*

List all other names you have used including nicknames. If you have ever used any surname other than your true name, during what period and under what circumstances were these names used? \_\_\_\_\_

Have you ever legally changed your name? ☐ Yes ☐ No  
If answer is "yes", designate \_\_\_\_\_  
*Date Place Court*

Residence Address: \_\_\_\_\_  
*Street City State and Zip Code (Current Address)*

Home Telephone: \_\_\_\_\_ Alternate Telephone: \_\_\_\_\_

Position Desired: \_\_\_\_\_

Type of employment Desired: \_\_\_\_ Full Time \_\_\_\_ Part Time

Desired Salary: \_\_\_\_\_ Date Available: \_\_\_\_\_

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

### II. CITIZENSHIP

Are you a citizen of the United States? Yes No

If not, are you authorized to work in the U.S.? \_\_\_\_ YES or \_\_\_\_ NO

### III. EDUCATION

Name City State: \_\_\_\_\_

Years Completed: \_\_\_\_\_

### IV. FORMER ADDRESSES

List chronologically all addresses for past 5 years  
(include street no., city, state, zip code and dates)

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

### V. EXPERIENCE (Length of Time)

Front End Loader: _____	Water Truck: _____
Dump Truck _____	Dozer: _____
Skidsteer _____	Grader: _____
Roller: _____	Skidsteer: _____
Excavator: _____	Grading Plans/Blue Prints _____
Other _____	

### VI. EMPLOYMENT (MUST ANSWER ALL QUESTIONS)

Have you ever been dismissed or asked to resign from any employment or position you have held? ☐ Yes ☐ No

Have you ever been employee of Triple G Containers & Services, LLC

If yes, please list: \_\_\_\_\_

*When? Department?*

Do you have a relative currently working for Triple G Containers & Services, LLC ? ☐ Yes ☐ No  
If yes, please list their Name/ Department/ Relationship:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Please list ALL employment you have ever held  
beginning with the most current first within the last 5 years.**

1. Employer Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ - To \_\_\_\_\_  
Work Performed: \_\_\_\_\_  
\_\_\_\_\_

Employer Telephone Number: \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Employer City, State and Zip: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_  
Hours worked per week: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_  
May we contact your previous supervisor for a reference? \_\_\_\_ Yes or \_\_\_\_ No

2. Employer Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ - To \_\_\_\_\_  
Work Performed: \_\_\_\_\_  
\_\_\_\_\_

Employer Telephone Number: \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Employer City, State and Zip: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_  
Hours worked per week: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_  
May we contact your previous supervisor for a reference? \_\_\_\_ Yes or \_\_\_\_ No

3. Employer Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ - To \_\_\_\_\_  
Work Performed: \_\_\_\_\_  
\_\_\_\_\_

Employer Telephone Number: \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Employer City, State and Zip: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_  
Hours worked per week: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_  
May we contact your previous supervisor for a reference? \_\_\_\_ Yes or \_\_\_\_ No

4. Employer Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ - To \_\_\_\_\_  
Work Performed: \_\_\_\_\_  
\_\_\_\_\_

Employer Telephone Number: \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Employer City, State and Zip: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_  
Hours worked per week: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_  
May we contact your previous supervisor for a reference? \_\_\_\_ Yes or \_\_\_\_ No

5. Employer Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ - To \_\_\_\_\_  
Work Performed: \_\_\_\_\_  
\_\_\_\_\_

Employer Telephone Number: \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Employer City, State and Zip: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_  
Hours worked per week: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_  
May we contact your previous supervisor for a reference? \_\_\_\_ Yes or \_\_\_\_ No

## VII. COURT RECORD

A. Have you ever been convicted with any Misdemeanor/Felony violation? ☐ Yes ☐ No  
This includes everything including traffic violations. Convictions include sentenced to confinement, paid fine, time served, placed on probation (including deferred adjudication) and court-ordered restitution. A conviction will not necessarily disqualify an applicant from employment.

Date	Place	Charge	Disposition	Details
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## VIII. REFERENCES

List **FOUR** of those who are responsible adults of reputable standing in their communities', business or professional men or women, who have known you for a minimum of seven years. Please list any relatives, former employees, fellow employees with complete information.

1. Complete Name: \_\_\_\_\_

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

*City State and Zip*

# of yrs known: \_\_\_\_\_ A/C & Phone #: \_\_\_\_\_

2. Complete Name: \_\_\_\_\_

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

*City State and Zip*

# of yrs known: \_\_\_\_\_ A/C & Phone #: \_\_\_\_\_

3. Complete Name: \_\_\_\_\_

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

*City State and Zip*

# of yrs known: \_\_\_\_\_ A/C & Phone #: \_\_\_\_\_

4. Complete Name: \_\_\_\_\_

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

*City State and Zip*

# of yrs known: \_\_\_\_\_ A/C & Phone #: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

**For Triple G Containers & Services, LLC USE ONLY**

Received: \_\_\_\_\_ Interview \_\_\_\_\_ Background \_\_\_\_\_ DOT \_\_\_\_\_

Confirm \_\_\_\_\_