



RELIABLE READY MIX CO. INC.

APPLICATION FOR EMPLOYMENT

[PRE-EMPLOYMENT QUESTIONNAIRE] [AN EQUAL OPPORTUNITY EMPLOYER]

PERSONAL INFORMATION

DATE

Month Day Year

NAME

LAST, FIRST, MIDDLE

SOCIAL SECURITY NUMBER

PRESENT ADDRESS

STREET, CITY, STATE, ZIP

PERMANENT ADDRESS

STREET, CITY, STATE, ZIP

PHONE NO.

ARE YOU 18 YEARS OF AGE OR OLDER?

EMPLOYMENT DESIRED

POSITION

DATE YOU CAN START

Month Day Year

SALARY DESIRED

ARE YOU EMPLOYED NOW?

IF SO, MAY WE CONTACT YOUR PRESENT EMPLOYER?

EDUCATION

HIGH SCHOOL

NAME AND LOCATION OF SCHOOL

*NO. OF YEARS ATTENDED

*DID YOU GRADUATE?

SUBJECTS STUDIED

EDUCATION

COLLEGE

NAME AND LOCATION OF SCHOOL

*NO. OF YEARS ATTENDED

*DID YOU GRADUATE?

SUBJECTS STUDIED

EDUCATION

TRADE OR BUSINESS SCHOOL

NAME AND LOCATION OF SCHOOL

*NO. OF YEARS ATTENDED

*DID YOU GRADUATE?

SUBJECTS STUDIED

**The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.*

GENERAL INFORMATION

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK:

U.S. MILITARY OR NAVAL SERVICE

RANK

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

SPECIAL QUESTIONS

DO NOT ANSWER ANY OF THE QUESTIONS BELOW UNLESS THE EMPLOYER HAS INDICATED THAT THE INFORMATION IS REQUIRED FOR A BONA FIDE OCCUPATIONAL QUALIFICATION, OR

Dictated by national security laws, or is needed for other legally permissible reasons.

HEIGHT:

In feet and inches

Weight

In pounds

Are you prevented from lawfully becoming employed in the U.S.?

Date of Birth *

Month Day Year

Have you been convicted of a felony or misdemeanor within the last 5 years? **

**The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.*

***You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied.*

FORMER EMPLOYERS

(LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH THE LAST ONE FIRST)

NAME AND ADDRESS OF EMPLOYER

SALARY

POSITION

REASON FOR LEAVING

NAME AND ADDRESS OF EMPLOYER

SALARY

POSITION

REASON FOR LEAVING

NAME AND ADDRESS OF EMPLOYER

SALARY

POSITION

REASON FOR LEAVING

NAME AND ADDRESS OF EMPLOYER

SALARY

POSITION

REASON FOR LEAVING

REFERENCES:

GIVE THE NAMES OF THREE PEOPLE NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME, OCCUPATION, PHONE NUMBER, YEARS ACQUAINTED

NAME, OCCUPATION, PHONE NUMBER, YEARS ACQUAINTED

NAME, OCCUPATION, PHONE NUMBER, YEARS ACQUAINTED

PHYSICAL RECORD

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED?

IF YES, WHAT CAN BE DONE TO ACCOMMODATE YOUR LIMITATIONS?

IN CASE OF EMERGENCY, PLEASE NOTIFY (NAME, ADDRESS, PHONE NUMBER)

PLEASE NOTE: ANY OFFER OF EMPLOYMENT IS CONTINGENT UPON THE APPLICANT CONSENTING TO A DRUG SCREEN TEST AND THAT TEST HAVING A NEGATIVE RESULT.

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE THE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING THE SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD OR GUARANTEED HOURS, AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF WAGES/SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE.

DATE_

Month Day Year

FOR COMPANY USE ONLY

INTERVIEWED BY:

DATE:

Month Day Year

COMMENTS:

HIRED:

START DATE:

Month Day Year

POSITION:

WAGE/SALARY:

BENEFITS: