

Rotschy Use On	y:	
Contact:		
Orientation:		
Start:		
Position:		
Classification:		
Wage:		

### APPLICATION FOR EMPLOYMENT AND PERSONNEL RECORD FOLDER

#### Please answer all questions.

This company is an equal employment opportunity employer. All applicants will be considered without regard to age, color, national origin, religion, sex, or other protected status in accordance with applicable federal and state equal employment opportunity laws.

If submitting electronically, please save a completed copy, then email to <u>HR@rotschyinc.com</u>.

Have you ever applied for employment at Rotschy, Inc.?	🗌 Yes	No
Have you ever worked for Rotschy, Inc.?	Yes	No
If so, when?		
GENERAL		

Today's Date:	-	Date Avai	lable for Emplo	pyment:
Full Name:	Middle	Last		
Social Security Number:			Date of Birth:	
Street Address:			City, St, ZIP:	
Mailing Address:			City, St, ZIP:	
Home Phone:			Cell Phone:	
Email Address:				
Are you over 21 years of age?			🗌 Yes	No
Do you have a valid driver's lice (All applicants are subject t				🗌 No
License Number:		State of Is	ssuance:	Expiration Date:
List any other current licenses o	r permits:			
Are you currently employed?			🗌 Yes	🗌 No
May we contact your present em If yes, list contact name				□ No
Are you legally authorized to wo	rk in the United	States?	🗌 Yes	🗌 No
Type of work desired:				
Wages expected:				
Can you perform the essential fu	unctions of the jo	b for whic	n you are apply	/ing? 🗌 Yes 🗌 No
Are you available to work:	II Time Part	Time	Overtime	Out of Town
Have you ever been convicted o Please note that a "yes" answer may not If "yes", please explain:	t bar you from consid			Yes No

## EDUCATION

	Elementary	High School	College
School Name:			
Years Completed:	45678	9 10 11 12	1234
Course of Study:			

## SPECIAL SKILLS, QUALIFICATIONS, AND CONSIDERATIONS

Please summarize your history of operating construction equipment, driving heavy trucks, or any other experience that relates to the position for which you are applying.

#### REFERENCES

List 3 non-relatives	who are familiar with your qualific	ations, actual work hist	tory, and abilities.
Name	Occupation/Relationship	Years known	Phone Number
1			

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

#### **EMPLOYMENT EXPERIENCE**

Start with your present or most recent job. List your jobs in order for the last 10 years. **Do not omit any job or period of time between jobs.** 

Employer:	Supervisor Name:		
Address:			
Phone:			
Duties:			
What did you like most about this job?			
What did you like least about this job?			
Reason for leaving:			
Employer:	Supervisor Name:		
Address:			
Phone:	Dates Employed:	to	
Duties:			
What did you like most about this job?			
What did you like least about this job?			
Reason for leaving:			

Employer:		Supervisor Name:		
Address:				
Phone:		Dates Employed:		to
Duties:				
What did you like mos	st about this job?			
What did you like leas	st about this job?			
Reason for leaving: _				
Employer:		Supervisor Name:		
Address:				
Phone:		Dates Employed:		to
Duties:				
What did you like leas	st about this job?			
DRIVING EXPER			n h i a la O	
-		, or privilege to operate a moto on suspended or revoked?		_ Yes
•				
List special courses o	or training that will help y	/ou as a driver:		
List any safe driving c	or other awards you hold	d, and from whom:		
List any sale unving e				
Accidents – for the pa	ast 3 years			
Date	Nature of Acc	ident (head-on, upset, etc.)	Fatalities	Injuries

## Traffic Convicitons and Forfeitures – for the past 3 years

Date	Location	Penalty	Charge

Do you have a CDL endorsement: If yes, please complete the following section.

#### CDL ENDORSEMENT

Have you ever been disqualified subject to Section 391 of the Federal Motor Carrier Safety Regulations (FMCSA Part 391)?

Equipment

Class of Equipment	Type of Driving (highway, off road)	Dates (from - to)
Dump Truck		
Truck & Trailer		
Heavy Haul, Lowboy		
Other		

List states operated in for last 5 years: \_

# Please read the following statements carefully before signing this application. Only those applications that are signed and dated are considered valid. If you have any questions regarding this statement, please ask them before signing.

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications.

I will be responsible for familiarizing myself with all rules and regulations of Rotschy, Inc. as they presently exist or are later modified. I recognize that my employment can be terminated, at the discretion of Rotschy, Inc. or at my option, without notice, at any time, except as specifically set forth in writing in a current individual employment agreement.

I also understand that no representative of Rotschy, Inc. has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms, and conditions of employment, except as specifically stated in a current written agreement signed by the President.

I understand that the information that has been provided may be used and prior employers may be contacted for the purpose of investigating the background as required by §391.23.

I understand Rotschy, Inc. is a drug-free workplace and performs pre-employment drug tests on all new hires, and I consent to any testing required by Rotschy, Inc.

This certifies that this application was completed by me, and that all the entries on it and information in it are true and complete to the best of my knowledge.

Applicant Signature

Date

This application is valid for 90 days from the date it is signed. If I want to be considered for job openings more than 90 days from today, I will submit a new application.



🗌 Yes 🗌 No