

P.O. Box 249
90 North 200 East
Loa, Utah 84747-0249



Phone: (435) 836-2685
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EMPLOYMENT APPLICATION

We are an equal opportunity employer. As such, we do not discriminate in hiring or employment on the basis of race, color, religion, creed, national origin, citizenship status, sex, age, disability or veteran status. No question on this application is intended to secure information about these subjects.

PERSONAL INFORMATION

Name:			Telephone:
Last	First	Middle	
Current Address:			How Long?
City, State, Zip:			
Previous Address:			How Long?
Social Security Number:		Date of Birth:	Home Phone: Mobile Phone:
Are you legally authorized to work in the United States? ☐ Yes ☐ No			
Do you have a reliable means of transportation to and from work that allow you to arrive consistently on time? ☐ Yes ☐ No			
Have you ever been convicted, pled guilty or no contest to a misdemeanor or felony? ☐ Yes ☐ No			
If yes, please give the dates and details of each:			

(A conviction will not necessarily disqualify you from employment.)

POSITION APPLYING FOR

Position desired:	☐ Full time ☐ Part time ☐ Temporary	Date available for work:	Desired Salary Range?
Are you currently employed? ☐ Yes ☐ No		May we contact your present employer? ☐ Yes ☐ No	
Have you ever applied for a job with us before? ☐ Yes ☐ No		If yes, where and when?	
Have you ever worked for us before? ☐ Yes ☐ No	Dates (from / to):	Name at termination:	
How did you come to us? (Please check the appropriate box below and give information where requested)			
☐ Employment Agency		☐ Job Service	
☐ Social Agency		☐ Walk In	
☐ Employee Referral		☐ School Recruiting	
☐ Advertising		☐ Job Fair	
☐ Other (explain):		☐ Friend	

CONSTRUCTION EXPERIENCE SUMMARY

Check any in which you have previous employment experience

☐ Laborer	☐ Truck Driver	☐ Heavy Equipment Operator
☐ Foreman	☐ Apprentice	☐ Other (explain) _____

This application will be actively considered for 30 days from the date of completion.

EDUCATION					
	Name and Location of School	Course of Study	No. of Years Completed	Date Graduated	Diploma / Degree
High School					
College, Business, or Technical College					
Apprenticeships or On-the-job Certification Programs					
List any special training, licenses, certificates and/or any other training, education, or personal characteristics that qualify you for the job:					
EMPLOYMENT					
<i>Start with your present or last job. Include any job-related military service assignments and volunteer activities. Exclude organizations which indicate race, color, religion, gender, national origin, disabilities or protected status. DOT Requires that Employment for at Least Three (3) Years and/or Commerical Driving Experience for the Past Ten (10) Years be Shown.</i>					
Employer:		Dates Employed			
Address:		From	To		
Name and title of Supervisor:		Hourly Rate / Salary			
Telephone Number(s):		Starting	Final		
Reason for Leaving:		May we contact? ☐ Yes ☐ No			
Employer:		Dates Employed			
Address:		From	To		
Name and title of Supervisor:		Hourly Rate / Salary			
Telephone Number(s):		Starting	Final		
Reason for Leaving:		May we contact? ☐ Yes ☐ No			
Employer:		Dates Employed			
Address:		From	To		
Name and title of Supervisor:		Hourly Rate / Salary			
Telephone Number(s):		Starting	Final		
Reason for Leaving:		May we contact? ☐ Yes ☐ No			
Were you ever discharged from any position? ☐ Yes ☐ No If yes, when?		Employer name and address:			Why?
Please explain any breaks of employment for more than three consecutive months:					

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REFERENCES	
Name:	Telephone:
Address:	Circle One: Business Personal
Best Time to Call: Occupation:	
Name:	Telephone:
Address:	Circle One: Business Personal
Best Time to Call: Occupation:	
Name:	Telephone:
Address:	Circle One: Business Personal
Best Time to Call: Occupation:	
DRIVER'S LICENSE INFORMATION	
<i>Please complete this section if the job for which you are applying may require you to drive a company vehicle</i>	
Do you have a valid driver's license? ☐ Yes ☐ No License number and State:	
If applicable: Do you hold a valid Commercial Driver's License (CDL)? ☐ Yes ☐ No If yes, please specify class.	
Have you been cited for any motor vehicle accidents / moving violations in the last five years?	
☐ Yes ☐ No If yes, please give details:	
Has your driver's license ever been suspended, revoked, denied or cancelled?	
☐ Yes ☐ No If yes, please explain:	
AUTHORIZATION AND ACKNOWLEDGEMENT	
I understand that nothing contained in this employment application or interview, and no company policies, procedures, correspondence or handbooks that I might receive, are intended to create an employment contract between the company and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the company unless it is made in writing by the President of the Company. If an employment relationship is established, my employment and compensation are "at will," and I understand that it is for no fixed period of time and I have the right to terminate my employment at any time, with or without use or notice, and tha the company retains the same right. I understand that the Company may investigate my driving record and may contact my previous employers, and I authorize those employers to disclose to the company all records pertinent to my employment with them. I hereby release my previous employers from all liability for issuing such information. I hereby waive any priviledge I may have to such information. I understand that any offer of employment is subject to successfully passing a drug/alcohol test that will be required during my first 30 days and may be required at any time during my employment. I also understand that ongoing compliance to the Company Drug Test policy and procedures including submissions to required drug tests are a condition of continued employment. I understand and acknowledge that if any misrepresentation or omission of material facts has been made by me or if the results of any investigation are not satisfactory for any reason, that any consideration, offer or actual employment by the company may be terminated immediately. If hired, I understand that employment is subject to proof of my employment eligibility within three (3) days of hire.	
SIGNATURE	
<i>Do not sign below until you have read and understand the above acknowledgement.</i> By signing below I certify that all of the information I have provided on this application is true and accurate.	
Applicant Signature	Date

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