KUDZUE 3
Trucking & Paving

APPLICATION FOR EMPLOYMENT

Date of Application: _____ Social Security No.: _____

Name: _____ Date Of Birth _____
Last First Middle

Address: _____
Street Address

_____
City State Zip

Phone No.: ( ) _____ E-Mail: _____

Do you have your own transportation? YES: ☐ NO: ☐

Have you ever applied to Kudzue3 or Blackjack before? YES: ☐ NO: ☐

Have you ever worked to Kudzue3 or Blackjack before? YES: ☐ NO: ☐

If Yes, When/What Position? _____

EMPLOYMENT DESIRED

Position: _____ Date You Can Start: _____

Desired Salary: _____ Are You Currently Employed? _____

May We Contact Your Current Employer? _____

EDUCATION

Name of School	City/State	Year Graduated	Degree
High School			
College			
Trade/Technical School			

Please List Any Special Training, Skills, Licenses/Certifications That May Qualify You For The Position You Are Appling For.

_____

_____

_____

_____

Have You Ever been Convicted Of, OR Pled Guilty or No Contest To A Crime? **YES** ☐ **NO** ☐

If Yes, Please Explain: _____

_____

_____

_____

KUDZUE 3
Trucking & Paving

PREVIOUS EMPLOYMENT

MOST RECENT or CURRENT EMPLOYER

Company Name: _____ Phone: _____

Date of Employment: From: _____ To: _____ Fax: _____

Position Held/ Duties: _____ Salary: _____

Supervisor's Name: _____ Reason For Leaving: _____

May We Contact This Employer? YES ☐ NO ☐

SECOND MOST RECENT EMPLOYER

Company Name: _____ Phone: _____

Date of Employment: From: _____ To: _____ Fax: _____

Position Held/ Duties: _____ Salary: _____

Supervisor's Name: _____ Reason For Leaving: _____

May We Contact This Employer? YES ☐ NO ☐

THIRD MOST RECENT EMPLOYER

Company Name: _____ Phone: _____

Date of Employment: From: _____ To: _____ Fax: _____

Position Held/ Duties: _____ Salary: _____

Supervisor's Name: _____ Reason For Leaving: _____

May We Contact This Employer? YES ☐ NO ☐

REFERENCES

Please List Below The Names of 3 Individuals That Are Familiar With Your Work Ability and Are No Relation to You.

Name	Address (and or) Phone	Business/Relationship	Years Known

Is There Any Additional Information That You Feel We Should Know About You, That is Applicable To The Position That You Are Appling For Today?

_____

APPLICATION CERTIFICATION

I hereby certify that all of the information listed on this application is true to my knowledge, correct and complete. I understand that any information provided by me that is false, incomplete or misrepresented could cause rejection of this application. I further understand that if the information on this application is found to be false at any time after I am employed, could result in termination of my employment.

I hereby authorize "The Company", or it's representatives to investigate all information (written or spoken) and verify the accuracy of any information provided on this application, resume and/or interview. I authorize the previous and/or current employers' as well the references listed to give "The Company" all information, facts and opinion about my previous employment or any other information sought after, and hereby waive all liability for such persons, organizations or corporations for furnishing "The Company" with this information.

I understand that my employment is conditional upon a satisfactory back ground check and/or medical examination, including drug screen test. I further understand that the use of illegal drugs are prohibited during my employment and am willing to submit to a drug screen test at any time during my employment. Failure to take such test when requested or an unsatisfactory result will disqualify me from consideration of employment, or if currently employed, could result in my immediate dismissal from employment.

If I am hired, I understand that I will be required to serve a ninety (90) day introductory period. I also understand that my employment with "The Company" may be terminated, at any time with or with out cause or notice by "The Company." and that I have the right to resign my employment with "The Company" at any time with out cause or notice. I further understand that no supervisor or reprehensive of "The Company" other than the Owner has the authority to enter into an agreement for employment.

By signing below, I certify that I have read, understand and agree to all statements above.

_____ Signature of Applicant

_____ Date

For Office Use Only, Do Not Write Below This Line

Hire Date: _____

Position: _____

Pay Rate: _____ per Hour Week Year

Comments: _____

_____

_____

_____