



NC License #27438

25 Crest View Road, Burnsville, NC 28714

Phone: 828-682-7714 Fax: 828-682-4145



## Application for Employment

An Equal Opportunity Employer

Position Applying For (Please check one): CDL Driver ( ) Equipment Operator ( ) Laborer ( ) Other ( )

**Applicant Note:** If you need assistance in completing this form or for any phase of the employment process, please notify the person that issued you this form. This application form is intended for use in assisting us in evaluating your qualifications for employment. This is not an employment contract. Please PRINT all answers truthfully and completely. Any person found to have intentionally misrepresented or omitted any material fact here-in, will automatically be disqualified from any further consideration for employment. All qualified applicants will receive consideration for employment without discrimination based on race, age, sex (including pregnancy), religion, national origin, physical or mental disability, genetic information, sexual orientation, gender identity, or any other state, local, or federal protected classification. A prior felony conviction may disqualify you from employment. Affirmative action hiring data may be requested by qualified applicants. Additional testing of skills directly related to essential job functions and testing for the presence of drugs and alcohol in your body will be required prior to beginning employment. Note: New hires are subject to E-verify of work status.

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

Current Address/City/State/Zip: \_\_\_\_\_  
How long resided at current address? \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Driver's License No. \_\_\_\_\_

Type License \_\_\_\_\_ State \_\_\_\_\_ Class \_\_\_\_\_ Endorsement(s) \_\_\_\_\_ Restriction(s) \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ (Required for Commercial Drivers)

Do you have the legal right to work in the United States? Yes ( ) No ( ) Check one:  US/Naturalized Citizen  
 Permanent Residence Alien No. A \_\_\_\_\_  Authorized Work Alien No. A \_\_\_\_\_

Have you applied to this company before? Yes ( ) No ( ) If yes, when and for what position? \_\_\_\_\_  
\_\_\_\_\_

Position applying for \_\_\_\_\_ Salary desired \_\_\_\_\_ Full-time ( ) Part-Time ( ) Temporary ( )

Are you able to perform the essential functions of the job for which you are applying with/without reasonable accommodation Yes  No  \_\_\_\_\_

Date available to start \_\_\_\_\_ Available to work: weekdays ( ) weekends ( ) nights ( ) overtime ( ) other ( )

How did you learn about this job opening? (or referred by) \_\_\_\_\_

Are you currently employed? Yes ( ) No ( ) Reason for leaving current or last employer? \_\_\_\_\_



<b>Traffic Convictions</b> (record all convictions and forfeitures for last 3 years)	Date	Charge	Penalty
Location			
Location			
Location			

Please detail any other information that you would like to relate in reference to this employment application: (Special skills, equipment operated, additional schooling, other experience, etc.) Attach resume if needed.

---



---



---



---

### **CERTIFICATION RELEASE**

“I certify that I have read and understand the applicant note on the front page of this application and that all answers given by me herein are true and correct to the best of my knowledge and belief. I hereby authorize the company, its agents and servants, and any credit reporting agency to verify any information set forth herein including, but not limited to my criminal history and motor vehicle driving record. I further authorize all persons, schools, former employers and law enforcement agencies to release such information as the company may request concerning my past and to hereby release such person, school, former employer and law enforcement agencies from any liability or damages which may result therefrom. I understand that the use of illegal drugs is prohibited during my employment and do hereby submit to drug testing by or at the direction of the company to detect the presence or absence of drugs in my body, both prior to and during my employment therewith. I acknowledge that any misrepresentations or omissions in this application will be grounds for termination.”

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

### **Affirmative Action Survey/Self Identify**

As an Equal Opportunity Employer, we are required by law to record certain information as part of our Affirmative Action Program. Applicants for employment are asked to participate by reporting their status as disabled, disabled veteran, Vietnam era veteran, or other minority. Applicants are under no obligation to respond but may do so voluntarily at this time (post-job offer) or in the future as warranted. All responses are confidential within Human Resources Dept., and responses will only be used for Affirmative Action Program. We value our diversity and actively encourage all minorities to apply. Refusal to supply this information will have no bearing on your application and potential employment. Check each of the following that apply:

Gender:      Male       Female       Other:      Individual with Disabilities

Veteran Status: Vietnam Era Veteran       Special Disabled Veteran       Other Protected Veteran   
 Recently Separated Veteran       Armed Forces Service Medal Veteran

Race/Ethnic Identity:      Hispanic or Latino       White (not Hispanic or Latino)   
 Black or African American (not Hispanic or Latino)       Asian (not Hispanic or Latino)   
 Native Hawaiian or Pacific Islander (not Hispanic or Latino)   
 American Indian or Alaskan Native (not Hispanic or Latino)   
 Two or More Races (not Hispanic or Latino)

I do not wish to Self-Identify.      Signature: \_\_\_\_\_