

Application for Employment

An Equal Opportunity Employer

We consider applicants for all positions without regard to race, color, religion, national origin, gender, disability, age, marital status, veteran status, creed, status with regard to public assistance, sexual orientation, or other legally protected status. Applicants of diverse backgrounds are encouraged to apply. All information you provide in this application may be used for the purpose of a background check. E.D. Hughes Excavating will investigate your background as required by DOT Regulations Part 391.23, and may perform other background checks the company deems appropriate for the position.

Interviews are on a competitive basis, using job-related factors, after a written application has been received and reviewed.

Because of the large number of applications received, not everyone who applies for a vacant position will be interviewed.

Please use ink, print information and complete application by answering each question fully & accurately. Applications must be completed by applicant.

Position(s) Applying for			Applicatio	n Date		
1.						
2.						
Last Name	First	Middle	Primary P	hone – [☐Home ☐Cell ☐Work	
Address			Alternate	Phone –	☐Home ☐Cell ☐Work	
City	State	ZIP	Pay Expe	cted		
Email Address			Date Avai	lable for V	Vork	
Addresses for past 3 years (complete	this section only if app	lying for driving pos	ition)			
Address	City		StateZIF		Length of time	
Address	City		StateZIF	·	Length of time	
Address	City	;	StateZIF	·	Length of time	
How did you loors about us?						
How did you learn about us?		□ Walk In	Company Wa	hoito	Employment / Work Force Agency	
☐ Employee Referral (employee name) ☐ College Recruitment ☐ Online					Employment / Work Force Agency	
Have you ever been employed with E						
If yes, give date Position	•	•				
Have you been convicted of a felony within the last seven years?						
(A conviction will not necessarily bar you from employment. This information will be used only for job-related purposes in accordance with applicable Law.						
Do not disclose convictions that have been expunged or judicially sealed). If yes, please explain:						
Are you legally eligible for employment in the United States? □Yes □No						
You must be 18 years of age or older to work in the highway/heavy construction industry. Are you of an age to work in this industry? □Yes □No						
Are you willing/able when the job requires to travel by personal vehicle?						
Jobs may require overtime. Are you willing to work overtime if needed?□Yes □No						
Projects may require working nights. Are you willing/able to work nights if jobs require?□Yes □No						
Are there specific shifts you are available to or prefer to work?						
Saturday or weekend work may be required. Are you willing to work Saturday or weekends if needed?						
Type of employment desired □Year-round □ Seasonal □ Part-time/temporary and dates available to to						
Can you perform the essential functions of this job? □Yes □No						

Employment History – YOU MAY ATTACH A RÉSUMÉ, BUT IT IS NOT ACCEPTABLE IN LIEU OF COMPLETING THIS APPLICATION.

<u>List your last Ten (10) years of employment</u>, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in the comments section below. **If more space is needed, please use additional paper.**

You may exclude experiences that reveal age, ancestry, disability, national origin, race, religion, sex or other protected status.

Employer	Telephone	Dates E	mployed	Summarize the nature of work performed	
		From	То	and job responsibilities	
Address					
Job Title		Hourly R	<u>I</u> ate/Salary	4	
			irting	1	
Immediate Supervisor and Title		\$	Per	1	
				_	
Reason for Leaving			inal	_	
		\$	Per		
	ederal Motor Carrier Safety Regulations (F			No	
	ated a safety-sensitive function subject to				
Employer	Telephone		mployed	Summarize the nature of work performed and job responsibilities	
Address		From	То		
Address					
Job Title		Hourly R	ate/Salary	1	
			ırting	1	
Immediate Supervisor a	nd Title	\$	Per	1	
]	
Reason for Leaving		F	inal		
		\$	Per		
	ederal Motor Carrier Safety Regulations (F				
	ated a safety-sensitive function subject to				
Employer	Telephone		mployed	Summarize the nature of work performed	
		From	То	and job responsibilities	
Address					
Job Title		Hourly R	ate/Salary	1	
OOD THIC			irting	1	
Immediate Supervisor a	and Title	\$	Per	-	
illillediale Supervisor a	ind Title	T ^Φ			
Reason for Leaving		F	inal	1	
		\$	Per	1	
Were you subject to the Fe	ederal Motor Carrier Safety Regulations (F	MCSRs) while em	ployed Yes	□No	
If yes, was your job design	ated a safety-sensitive function subject to	the Drug and Alco	hol Testing Red	uirements of 49CFR 40? Yes No	
Employer	Telephone	Dates E	mployed	Summarize the nature of work performed	
		From	То	and job responsibilities	
Address					
Joh Titlo		Hourly B	<u>I</u> ate/Salary	-	
Job Title				-	
Immediate Cupervisor and Title			rting Tpor	-	
Immediate Supervisor and Title		\$	Per		
Reason for Leaving		F	inal	1	
		\$	Per	1	
Were you subject to the Fe			I □No		
	ated a safety-sensitive function subject to				
Comments/other infe	ormation (gaps of employment))			
Manage a sector of a					
-	r current and previous employe	ers ?		□Yes □No	
If No, please explain:					

Education/Training (including apprenticeships and specialized training) Type of School Name and Loacation of School Did you Graduate? Course of Study No. Years Diploma/Degree/Major Completed High School Trade/Technical College/University Graduate or Professional Other (Explain) Please identify experience you have in the following areas: **Truck Driving** Type of Equipment Duration of **Labor Positions** Type of Experience Duration of **Positions** Experience Experience (months/years) (months/years) Tractor-trailer Laborer (common) Dump truck Laborer (concrete) Ready mix truck Laborer (gravel) Boom truck Laborer (paving) Flagger Certification ☐ Yes ☐ No **Equipment Operator Positions** Raker Backhoe **Bobcat** Carpenter Crusher **Maintenance Positions** Dozer Farm tractor Mechanic Welder Certification ☐ Yes ☐ No Forklift Loader Electrician Finish Yes No License type Motor grader Parts dept Packer (tractor) Other Positions Paver Paver/screed Estimator Roller Drafting Screen plant Dispatch Washplant Clerical Asphalt plant Purchasing Summarize any additional training, skills, licenses and/or certifications that may qualify you as being able to perform job-related functions in the position(s) for which you are applying. Professional References (not relatives or previous employers) Name **Address** Relationship **Phone Number**

1. 2. 3.

Driv	ver's license number	State	_ Class:□A □B □C □D	Soc. Sec. #
I au	thorize E.D. Hughes Excavating to	access my driving record _		Date
Affi	davit – Applicant's Stateme	ent		
qua	D. Hughes Excavating is an Equal Opp alifications, regardless of race, color, re gard to public assistance, sexual orient	eligion, national origin, gender	, disability, age, marital status, v	veteran status, creed, status with
l ur	nderstand and agree that:			
1.	Although management makes every effort mandatory: overtime, shift work, weekend	•	rences, business needs may at any	time make the following conditions
2.	I understand that if I am employed at a div wage, benefits and employment conditions resign at any time and the employer may of	at any time. Employment with th	is organization is of an "at will" natu	•
3.	If a job offer is made by the company, I ag condition of employment. I understand that	ree to submit to a post-offer, pre-e	employment physical examination, f	
4.	If I am employed, any misrepresentation of immediate discharge from the employer's			cause for cancellation of this application or
5.	My signature authorizes E.D. Hughes Exc be necessary in arriving at an employmer connection with my application. I authoriz my employment, academic records, char-	t decision. I hereby release emple e said companies, schools or per	oyers, schools or persons from all li	
6.	In the event of employment, I understand understand, also, that I am required to a	_		
7.	I authorize said companies to release info drug tests, refusals to test, other violation other information obtained from previous	s of DOT agency regulations, doc	umentation of completion of the ret	
8.	I understand that information I provide re- of investigating my safety performance h	-		employer(s) will be contacted, for the purpo
9.	I understand that I have the right to review	v information provided by current/ ers to re-send the corrected inforr	previous employers, have errors in mation to the prospective employer,	and have a rebuttal statement attached to
10	. I understand that nothing contained in this	employment application or in the	e granting of an interview creates a	contract between E.D.Hughes
	Excavating and me for employment or for promise or guarantee is binding upon E.I		egarding employment have been m	ade to me and I understand that no such
l ha	ve read and understand the above. I	also certify that answers gi	ven herein are true and comp	elete to the best of my knowledge.
Арр	licant's signature:			Date:

The company is an Equal Opportunity Employer and has adopted an Affirmative Action Program to provide equal employment opportunity in all personnel activities without regard to race, color, religion, national origin, gender, disability, age, marital status, veteran status, creed, status with regard to public assistance, sexual orientation, or other legally protected status. The company provides reasonable accommodations to qualified individuals with disabilities, in accordance with the Americans with Disabilities Act and applicable federal, state and local laws.

Please complete the following information if applying for a position that requires a CDL

Affic	davit	to authorize r	elease of employm	ent drivi	ing record wi	th drug	test result inform	mation
Use this form to ob	otain	the Employmer	nt Driving Record wi	th drug te	est result infor	mation.		
 Complete all info Bill to: Send completed 		n to: E.D. Hugh	nes Excavating esources Dept					
I,				of				
I,	(Pr	int name)				(Pr	int address)	
authorize the release	of my	employment driv	ing record, including d	rug test re	sults, to be repo	rted to E	.D. Hughes Excavatir	g.
Social Security Nu	mbe	r:		_				
					Driver's	Licens	e Class: □A □B	□C □D
When does	s you	r license expire	?	Is you	ır license a CE	DL? □Y	′es □No	
Is your license valid	d an	d current: □Ye	s □No List any	endorse	ments on you	r licens	e:	
Signature of Applic	ant					Date		
X	, di 10					X		
The information b	elow	will be used wher	e applicable for reques	sts concerr	ning your driving	g record	to comply with DOT a	nd state regulations.
		State of Issu	e License	#	Туре	E	indorsement	Expiration Date
List All Unexpire	ed							
Driver's License	es							
B. Has any licen C. Have you eve D. Have you eve	nse, per be er tes er ha	permit or privile en disqualified sted positive, ac d an alcohol te	ge ever been suspe subject to section 3 dulterated a sample st with a result of 0.0	ended or r 91 of the or refuse 04 or high	revoked? federal motor ed a drug or al ner?	carrier	safety regulations	
Please list all cor	mme	ercial and priva			<u> </u>	ears (at	tach sheet if mor	e space is needed).
		Dates		re of Acc			lmiia	-/Estalities
Last Accident		Dates	(head-on, re	ear-end,	upset, etc.)		injurie	s/Fatalities
Next Previous						-		
Next Previous								
Next Previous								
Next Previous								
(includin	na ro		all traffic violation	-		_	•	violations)

(including revocation, suspension or withdrawal of an operator's license, but not parking violations).

Date Offense Location Type of Vehicle Operated

Date	Offense	Location	Type of venicle Operated