

Employment Application

Please read before completing application

We appreciate your interest in Southwest Erosion Control. Please read all information before filling out and signing this application. Complete this application as accurately and thoroughly as possible by printing. Please advise us if you need assistance with completing this application form.

Southwest Erosion Control is an Equal Employment Opportunity/Affirmative Action employer and all recruiting, hiring, training, promotion, compensation, and other employment related programs are provided fairly to all persons on an equal opportunity basis without regard to race, creed, color, religion, sex, age, national origin, disability, veteran status, or any other characteristic protected by law. Applications requiring reasonable accommodation to the application or interview process should notify a representative of the Human Resources Department. As required by the Immigration Reform and Control Act, in the event you are hired, you must establish proof of eligibility to work in the United States within three days of your start date.

Personal Data

Legal Name			
Address			
City ST Zip		Email	
Home Phone		Cell Phone	
1. Are you eligible to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2. Have you ever been convicted of a felony or pled guilty or no contest? <input type="checkbox"/> Yes* <input type="checkbox"/> No <i>*a conviction will not necessarily bar you from employment</i>			
3. Have you previously worked for Southwest Erosion Control? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?			
4. Have you ever applied here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?			
5. How did you hear about us?			
6. Are any of your relatives currently employed here? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, who?			
7. Are you over the age of 18? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Position(s) Applying For			
Hours Available		Days Available	
Salary / Wage Expectations		Available for Overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is there any reason why you would be unable to perform the essential functions of this position without special accommodations? (<i>*ONLY answer if you have been provided with a copy of the job description and read what the essential functions are.</i>) <input type="checkbox"/> Yes* <input type="checkbox"/> No			
If required by the job, please state what languages you speak other than English:			

Employment History - Please list all employers you have had for the past 7 years, beginning with your current employer. Use additional pages if necessary.

May we contact your current employer prior to any potential employment offer? Yes No

Company		Phone Number	
Street Address		Your Title	
City St Zip			
Supervisor's Name and Title			Starting/Ending Dates
Reason for Leaving			Starting/Ending Wage \$ \$

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Street Address		Your Title	
City St Zip			
Supervisor's Name and Title			Starting/Ending Dates
Reason for Leaving			Starting/Ending Wage \$ \$

Education – Please note only the highest level of education you have completed.

	School Name	City	State	Major Course of Study	Degree or Certificate Earned
High School					
College					
Trade School					
Other					

Please list additional experience or skills that have a direct relationship to the job for which you are applying, including any licenses, and their latest dates of origination and issuing authority.

License or Certificate	Expiration Date	Issuing Authority	City	State

DOT Driving Experience – Complete only if you are applying for a Commercially Licensed Driving position.

Class of Equipment	Type of Equipment	Dates	Number of Miles

Professional References - Please list 2 references who are not related to you. Please list 1 of your previous supervisors.

Name	Company	Phone Number	Years Known

Applicant's Certification and Acknowledgment

Please read this carefully before signing below.

I hereby certify that the information I have provided in this application and in any documents I have submitted to Southwest Erosion Control in support of my application for employment, including resumes and transcripts, and/or information provided during the interview process, is complete and accurate to the best of my knowledge. I realize any falsification and/or misrepresentation or material omission of that information, stated or implied, may result in the denial of any employment offer, or the immediate termination of my employment if I am employed.

I also understand that employment with Southwest Erosion Control is conditioned upon the completion of an Authorization for Release of Background Information and other employment documents as necessary, as determined by Southwest Erosion Control. In conjunction with the requirements of the federal Fair Credit Reporting Act and/or other applicable laws, I hereby authorize and consent to the investigation of all statements contained in this application and authorize all persons and companies named above and/or their agents to release any and all records and information pertaining to my employment history, police record, education background, military service, or personal reputation. Pursuant to applicable law I hereby release all parties from liability for damage for providing this information.

I understand that a post-offer drug and or physical examination may be required. I understand that, as allowed by the Americans with Disabilities Act and its Amendments, any offer of employment may be withdrawn if I test positive for drugs and or if a condition is discovered which does not permit me to perform the essential functions of the job and for which no reasonable accommodation can be made.

I understand that employment with Southwest Erosion Control is "at will." If I become employed by Southwest Erosion Control my employment and compensation are for no definite period and, regardless of the time and manner of payment of my wages, salary or other benefits, my employment and compensation can be terminated at any time, with or without cause and with or without notice at either the option of the Company or myself. I further understand that there are no other arrangements, agreements or understandings, oral or written, contrary to the foregoing and that the understanding set out herein supersedes any prior contrary statements. I further understand that any modification to this Certification and Acknowledgment will not be effective unless in writing and personally signed by a representative of Southwest Erosion Control having actual authority to approve such modification.

I understand that, if I am hired, I am required to abide by all of the Company's rules, policies and procedures. I also understand that the Company's rules, policies and procedures can and may be changed or modified at any time, with or without notice.

Southwest Erosion Control maintains applications for no more than sixty (60) days. I understand that if I have not heard from Southwest Erosion Control within this time and still wish to be considered for a position, it will be necessary to fill out a new application.

I have read or had read to me this release form and I understand voluntarily consent and agree to sign below.

Signature: _____ Date: _____