

# APPLICATION FOR EMPLOYMENT

Erickson Asphalt Services, INC • 12739 320th Ave, Princeton MN 55371 • PO Box 176  
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## I. PERSONAL INFORMATION

Date:  Full Name:  Position Applied For:

Address:  Time at address:

Previous address (if <2 yrs):

Home Phone:  Cell Phone:  Email:

Date of Birth:  SSN:

Driver's License #:  Type/Class:  State:  Expires:

Federal law prohibits employment of unauthorized aliens. All persons hired must submit satisfactory proof that they are lawfully employable in the USA (valid driver's license, birth certificate, INS authorization, etc). Failure to submit such proof will result in rejection for consideration.

Are you able to perform the essential functions of this position? Yes  No

Have you ever been treated for back injuries? Yes  No

Do you have any pre-existing health conditions? Yes  No

If yes to any above, please explain:

## DRIVING EXPERIENCE

Class of Equipment	Type (van, tank, flat, etc.)	Dates (from-to)	Approx. Miles
Straight / Dump Truck	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tractor & Semi-trailer	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (skid loader, etc.)	<input type="text"/>	<input type="text"/>	<input type="text"/>

## TRAFFIC CONVICTIONS AND FORFEITURES (other than parking)

Location	Date	Charge	Penalty
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Have you been denied a license, permit, or privilege to operate a motor vehicle? Yes  No

Has any license or privilege ever been suspended or revoked? Yes  No

If yes, please explain:

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## II. EDUCATIONAL HISTORY

School Name & Location	Degree / Certificate	Year Graduated
High School		
College		
Trade / Tech		

## III. EMPLOYMENT HISTORY (list all employment for the past 5 years; attach extra sheet if needed)

### Current Employer:

Employer:  Dates:  Wages:

Address:  Phone:  Position:

Job Description:

Reason for Leaving:

### Previous Employer #1:

Employer:  Dates:  Wages:

Address:  Phone:  Position:

Job Description:

Reason for Leaving:

### Previous Employer #2:

Employer:  Dates:  Wages:

Address:  Phone:  Position:

Job Description:

Reason for Leaving:

## IV. REFERENCES (do not include relatives or former employers)

Name	Years Known	Occupation	Phone	Relationship
Prof. Ref. 1	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>
Prof. Ref. 2	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>
Personal Ref. 1	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>
Personal Ref. 2	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>

V. WORK AVAILABILITY

- 1. When will you be available to begin work?
- 2. Are you able to work overtime? Yes  No
- 3. Can you work overtime without prior notice? Yes  No
- 4. Can you work Saturdays? Yes  No
- 5. Can you work Sundays? Yes  No

VI. AUTHORIZATION

I certify that the facts contained in this application are true and complete to the best of my knowledge. Any false statement, omission, or misrepresentation is sufficient cause for refusal to hire, or dismissal if employed, no matter when discovered by Erickson Asphalt Services, INC.

I understand employment is conditioned on a background check. I authorize Erickson Asphalt Services, INC to investigate all statements in this application and authorize former employers and references to disclose information regarding my employment, character, and general reputation.

Nothing in this application creates an employment contract. If hired, my employment will be 'at will' and may be terminated at any time, with or without cause, without prior notice, at the option of Erickson Asphalt Services INC or myself.

If offered employment, I agree to submit to a medical examination and drug test before starting work and at any time deemed appropriate by Erickson Asphalt Services INC. My employment is contingent upon satisfactory results and compliance with the company Drug and Alcohol Policy.

Filling out this form does not indicate a position is open and does not obligate Erickson Asphalt Services INC to hire. If hired, I agree to abide by all company work rules, policies, and procedures.

FAIR CREDIT REPORTING ACT DISCLOSURE

In accordance with the Fair Credit Reporting Act, you are informed that reports verifying your previous employment, drug/alcohol test results, and driving record may be obtained for employment purposes as required by Federal Motor Carrier Safety Regulations §§ 382.413, 391.23, and 391.25.

Applicant Signature (print name to sign digitally)

Date

**1. Once completed, please save this PDF to your computer or phone.**

**2. Email the saved PDF to: [info@ericksonasphalt.com](mailto:info@ericksonasphalt.com)**

Questions? Call us at 763-389-5267