

APPLICATION FOR EMPLOYMENT



Pavement Maintenance Contractors

RETURN TO: Fahrner Asphalt Sealers, LLC.

2800 Mecca Drive
P.O. Box 95
Plover, WI 54467
Phone (715) 341-2868
1-800-332-3360
Fax (715) 341-1054

6615 US Hwy 12 W
PO Box 659
Eau Claire, WI 54702
Phone (715) 874-6070
1-800-497-4907
Fax (715) 874-6717

860 Eastline Road
Kaukauna, WI 54130
Phone (920) 759-1008
1-800-261-1900
Fax (920) 759-1019

316 Raemisch Road
Waunakee, WI 53597
Phone (608) 849-6466
1-800-898-2102
Fax (608) 849-6470

3468 115th Street
Frederic, WI 54837
Phone (715) 653-2535
Fax (715) 653-2553

2224 Veterans Memorial Pkwy
Saginaw, MI 48601
Phone (989) 752-9200
Fax (989) 752-9205

www.FahrnerAsphalt.com

THIS COMPANY IS AN EQUAL OPPORTUNITY EMPLOYER We consider applicants for all positions without regard to race, color, creed, religion, national origin, ancestry, sex, sexual orientation, disability, age, marital status, pregnancy or childbirth, use of lawful products, arrest or conviction record, honesty testing, genetic testing or information, military service membership, status with regard to public assistance, local human rights commission activity, gender identity, height, weight or other basis prohibited by applicable local, state or federal fair employment laws. Applicants who, because of a disability, require accommodations in the application or interview process, are encouraged to make such needs known at the time of applying.

Date _____

Application For Employment

(Applications will be considered current for a period of 12 months.)

(PLEASE PRINT)

Name

LAST

FIRST

MIDDLE

Address

NUMBER

STREET

CITY

STATE

ZIP CODE

Telephone (_____) _____

Area Code

If employed and you are under 18
can you furnish a work permit? Yes No

Have you filed an application here before? Yes No If yes, give date _____

Have you ever been employed here before? Yes No If yes, give date _____

Are you employed now? Yes No May we contact your present employer? Yes No

Are you currently a U.S. citizen or otherwise currently
Authorized to obtain lawful employment in this country? Yes No
(Proof of citizenship or immigration is required to be
furnished at the time of hire.)

On what day would you be available for work? _____

Type of employment desired: Fulltime Part-Time Temporary Seasonal

Are you on a lay-off subject to recall? Yes No

Will you relocate if job requires it? Yes No Will you travel if job requires it? Yes No

Other than for purposes of religious observances or practices are there any days or times
that you would not be available for work? Yes No
If yes, please list the dates and /or times you would not be available:

If offered a position conditioned on the results of a medical examination and if required by the
employer, will you undergo a pre-employment physical? Yes No

Have you ever been convicted of a misdemeanor or felony? Yes No
(This company will consider your conviction record only as it may substantially relate to the position(s) for which you are
applying.)

If yes, please explain _____

GENERAL INFORMATION

What specific kind of work are you applying for?

List special qualifications you have.

What equipment are you qualified to operate?

REFERENCES

List name and telephone number of three (3) business/work references who are **not** related to you.

Name	Telephone	Years Known
	()	
	()	
	()	

DRIVER'S LICENSE

TO BE COMPLETED FOR ALL POSITIONS INVOLVING THE OPERATION OF A MOTOR VEHICLE OR OFF-ROAD EQUIPMENT.

TYPE OF DRIVER'S LICENSE YOU HOLD <input type="checkbox"/> OPERATOR <input type="checkbox"/> COMM'L. OPERATOR TYPE: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	ISSUED BY WHAT STATE	EXPIRATION DATE	DRIVER'S LICENSE NO.
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Has your driver's license been revoked or suspended in the last 3 years? Yes No

If yes, explain _____

How many years have you been driving? Less than 1 year 2-3 years Over 3 years

Any restrictions on your license? Yes No

If yes, explain _____

Did you have any moving traffic violations or accidents in the last 3 years? Yes No

If yes, show details below.

MO./YR.	DESCRIPTION OF VIOLATIONS (not parking)	MO./YR.	DESCRIPTION OF ACCIDENTS

(Above may be verified by DMV check)

Employment Experience

Start with your present or last job. Explain any gaps in employment in Comments sections below.

Employer	Telephone ()	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate/Salary		
Supervisor				
Reason for Leaving				
Employer	Telephone ()	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate/Salary		
Supervisor				
Reason for Leaving				
Employer	Telephone ()	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate/Salary		
Supervisor				
Reason for Leaving				
Employer	Telephone ()	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate/Salary		
Supervisor				
Reason for Leaving				

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience.

Education

Education	Name and Location	Circle Last Year Completed	Did you Graduate?	Subjects Studied
High School	_____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College	_____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Please list any education or courses, which you feel qualify you for the position(s) for which you are applying. Include school(s) attended and degree(s), if any, obtained.				

Applicant's Statement

I certify that the information contained in my application is true and complete. I understand that false statements or material omissions on this application may result in rejection on my application, or if employed, may result in my dismissal. Furthermore, I understand that I am free to resign my employment at any time and the Company reserves the right to terminate my employment at any time, with or without cause, and without prior notice. I understand that no representative of the Company has the authority to make any assurances or representatives to the contrary.

I authorize the company to investigate all references, to verify all information I have supplied and to secure such other information as may relate to my application for employment. I release from all liability or legal claims every person seeking or providing information, whether oral or written. A photocopy of this release shall be as valid as the original, and may be relied upon by all persons providing information.

The Company is an equal opportunity employer. The Company does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state or federal law.

I understand that neither this document nor any offer of employment from the Company constitutes an employment contract, either expressed or implied.

Signature of Applicant

Date

For Personnel Department Use Only

Arrange Interview	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Remarks	_____			
Employed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date of Employment	INTERVIEWER
Job Title	Hourly Rate/ Salary		Department	DATE
By		NAME AND TITLE		DATE

NOTICE FOR ALL EMPLOYEES & APPLICANTS

OPERATING STATEMENT

It is the policy of Fahrner Asphalt Sealers, L.L.C. to assure that applicants are employed, and that employees are treated equal during employment, without regard to their race, color, national origin, religion, creed, sex, disability, marital status, arrest or conviction record, ancestry, membership in the National Guard, state defense force or reserves, age, or status as a special disabled veteran or veteran of the Vietnam era, use of lawful products, honesty testing, pregnancy or childbirth, genetic testing, military or military service membership. Such action shall include: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including: apprenticeship, preapprenticeship, or on-the-job training.

We encourage our employees to refer qualified and/or qualifiable minority and female applicants for employment.

DESIGNATION OF EEO/AA OFFICER

Fahrner Asphalt Sealers, L.L.C. has designated Megan Krings, at 2800 Mecca Drive, Plover, Wisconsin 54467, at (715) 341-2868 as the EEO/AA Officer. Megan Krings has the responsibility to effectively administer and promote this Policy, and is assigned adequate authority and responsibility to do so.

TRAINING LETTER

Fahrner Asphalt Sealers, L.L.C. has an approved informal training and promotion program available through various associations. We encourage your participation in these programs. Periodic random interviews will be conducted to assess the training needs of our employees.

At this time, our company offers training programs in the following job classifications/ areas: Drivers, Laborers, and Mechanics.

To be considered for our company's training program, a prospective trainee must be an employee in good standing and/or have supervisory approval. For further information, copies of outlines of individual job classifications/area training programs contact Megan Krings at the Fahrner Asphalt office at 2800 Mecca Drive, Plover, Wisconsin 54467. Fahrner Asphalt office phone number is (715) 341-2868.

Name: _____
Please Print

AFFIRMATIVE ACTION VOLUNTARY IDENTIFICATION

This Company is a government contractor. A requirement for Federal or Federally Assisted Construction Contracts is to report the number of handicapped, veteran, male/female, and minority/non-minority employees and applicants we have.

SUBMISSION OF THE INFORMATION REQUESTED BELOW IS **STRICTLY VOLUNTARY.**

Referral Source(s):

- Advertisement
- Employee
- Relative
- Walk-in
- Other
- Government Employment Agency
- Private Employment Agency

What is your race/ethnic origin?

- White
- Black or African American
- Hispanic or Latino
- Asian
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native
- Two or More Races

Name of referral source (if applicable) _____

What is your Gender?

- Female
- Male

Are you disabled/handicapped?

- Yes
- No

Please check all categories that apply to you:

Special Disabled Veteran

- A veteran who is entitled to compensation under laws administered by the Dept. of Veterans Affairs for a disability.
 - Rated at 30% or more; or
 - Rated at 10% to 20% in the case of a veteran who has been determined under Section 1506 of Title 38 USC to have a serious employment handicap; or
- A person who was discharged or released from active duty because of a service connected disability.

Veteran of the Vietnam-Era – A person who served more than 180 days of active military service, any of which was during the period 8-5-1964 through 5-7-1975, and was discharged or released with an honorable discharge or was discharged or released because of a service-connected disability.

Other Veterans – A person who served on active duty during a war; or a person who served in a campaign or expedition for which a campaign badge, a service medal or an expeditionary medal has been awarded.

Newly Separated Veteran – A person who served on active during the one-year period beginning on the date of such veteran's discharge or release from active duty.

Discharge Date: _____ (To be completed by all veterans).

This information will be used only for Affirmative Action reporting purposes and will not become part of your employment file or application, nor will it be used as a basis for any personnel action.

Submission of this information is confidential, and is solicited on a strictly voluntary basis. Your decision to provide the information will not result in any adverse treatment.

I decline to provide this information

This company is an Equal Opportunity / Affirmative Action Employer and does not discriminate on the basis of race, color, creed, religion, national origin, ancestry, sex, sexual orientation, disability, age, marital status, pregnancy or childbirth, use of lawful products, arrest or conviction record, honesty testing, genetic testing or information, military service membership, status with regard to public assistance, local human rights commission activity, gender identity, height, weight or other basis prohibited by applicable local, state or federal fair employment laws or regulations.

Date: _____ **Signature:** _____