



YARDWORKS

Management Solutions

19001 Hull Street Road, Moseley, VA 23210

www.yardworksonline.com

EMPLOYMENT APPLICATION

YARD WORKS considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. YARD WORKS is an equal opportunity employer.

NAME: _____ DATE: _____
Last First Middle Initial

SOCIAL SECURITY: # _____ DATE OF BIRTH: _____

DAY TIME TELEPHONE: # _____ EVENING PHONE: # _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE _____

ELIGIBILITY TO WORK IN THE U.S.? _____ YES _____ NO

ARE YOU: 16 YEARS OLD OR OLDER? _____ 18 OR OLDER? _____

PLACEMENT INFORMATION

CHECK NEXT TO THE POSITION(S) THAT YOU ARE INTERESTED IN:

_____ Tractor Trailer Driver _____ Wheel Loader Operator
_____ Delivery Driver _____ Office Personnel
_____ Site Attendant _____ Other: _____
Full Time _____ Part Time _____



FOR OFFICE USE ONLY:
FILE FOR FUTURE REFERENCE _____
DECLINED _____

HIRED _____ **POSITION** _____ **WAGE** _____

SIGNATURE OF INTERVIEWER _____

Added to Insurance: _____ **Fuel Card Ordered:** _____

EMPLOYMENT HISTORY

Are you currently employed? Yes No Temporary Layoff Permanent Layoff

Current or Last Employer

Company: _____ Address: _____

Phone # _____ Supervisor's Name & Title: _____

Position: _____ Dates Worked (From/To) _____ Rate of Pay _____

Duties _____

Reason for Leaving _____

Company: _____ Address: _____

Phone # _____ Supervisor's Name & Title: _____

Position: _____ Dates Worked (From/To) _____ Rate of Pay _____

Duties _____

Reason for Leaving _____

How much time have you missed from work during the past 12 months? _____

Have you ever been discharged from any position? _____ If yes, please explain _____

Please summarize any additional information necessary to describe your full qualifications.

Briefly state why you would like to work for our company. _____

HAVE YOU EVER BEEN FOUND GUILTY OF A FELONY OR MISDEMEANOR? _____ IF YES WHEN and PLEASE EXPLAIN _____

(CONVICTION WILL NOT NECESSARILY DISQUALIFY AN APPLICANT FROM EMPLOYMENT)

EDUCATION

High School Name _____ Address _____

Course or Major _____ Graduated _____yes _____no

College Name _____ Address _____

Course or Major _____ Graduated _____yes _____no Degree _____

Other School Attended _____ Address _____

Course or Major _____ Graduated _____yes _____no Degree _____

In what activities and organizations, including athletics, did you participate in school? _____

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING AND DATING THIS APPLICATION

APPLICANT'S CERTIFICATION AND ACKNOWLEDGEMENT

In consideration of my employment, I hereby agree and acknowledge the following: I agree to conform to the Company's rules and regulations as they may be issued or modified from time to time. I certify that the information contained in this application is correct and complete to the best of my knowledge, and I understand that falsification, misrepresentation or omission of facts called for in this application is grounds for disqualification from further consideration or will result in termination of my employment without notice. I authorize an investigation of all information contained in this application and authorize the references and former employers listed above to give the Company any and all pertinent information they may have, personal or otherwise, and I hereby release all parties who provide such information from all liability and damages on account of having furnished said information including my personal character, habits, work record, etc. I understand and agree that my employment and compensation (if hired) is for no definite period of time and may, regardless of the date of payment of my wages or salary, be terminated with or without cause, and with or without notice, at any time, at my option or the option of the Company. I understand that this application is current for only ninety (90) days.

At the end of that time, if I do not hear from YARD WORK, LLC., and still wish to be considered for employment, it will be necessary for me to fill out a new application.

DRUG AND ALCOHOL TESTING

In the event that the Company determines that I am eligible for an offer of employment, I understand that I may be required to participate in blood and /or urine testing for alcohol, chemical dependency or other substance abuse. I consent to administration of such testing and I understand that in addition to testing as a part of the application or hiring process, I may be subject to future random testing and testing "for cause," which may include involvement in job-related accidents, suspicious behavior, etc. I understand that in the event that I refuse to consent to such a test or violate the Company's drug and alcohol policy, or test positive for substance abuse or chemical dependency, my application for employment will be disqualified from further consideration or my employment will be terminated without notice. Accommodation will be made for the use of legally prescribed medication taken under the direction of a physician.

SIGNATURE OF APPLICANT: _____ DATE: _____

PLEASE GIVE A SUMMARY ABOUT YOURSELF:

NAME WHAT YOU BELIEVE TO BE YOUR STRENGTHS PERSONALLY OR PROFESSIONALLY:

DESCRIBE WHAT YOU BELIEVE TO BE YOUR WEAKNESS:

CAN YOU HANDLE MULTI-TASK FUNCTIONS AND DO SO IN A TIMELY AND ACCURATE MANNER:
(PLEASE SITE JOB OR PERSONAL INSTANCES.)

REFERENCES

PLEASE LIST ANY PERSONAL REFERENCES :

NAME _____ PHONE _____

RELATIONSHIP _____

NAME _____ PHONE _____

RELATIONSHIP _____

NAME _____ PHONE _____

RELATIONSHIP _____

PLEASE LIST AT LEAST THREE (3) JOB REFERENCES:

COMPANY NAME _____

CONTRACT PERSON _____ DIVISION _____

PHONE _____ EXT. _____

COMPANY NAME _____

CONTRACT PERSON _____ DIVISION _____

PHONE _____ EXT. _____

COMPANY NAME _____

CONTRACT PERSON _____ DIVISION _____

PHONE _____ EXT. _____