

APPLICANT INFORMATION					
Last Name	First	M.I.	Date		
Street Address			Apartment/Unit #		
City	State	ZIP			
Phone		E-mail Address			
Date Available		Social Security No.			
Position Applied for <input type="checkbox"/> Concrete Mixer Truck Driver <input type="checkbox"/> Other: _____					
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when? Position?	
EDUCATION					
High School		Address			
		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College		Address			
		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other		Address			
		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
COMMERCIAL DRIVER QUALIFICATIONS / NON-COMMERCIAL DRIVER QUALIFICATIONS					
<i>*You must be qualified, licensed, and insurable in order to hold any position that requires driving.</i>					
License #			Issuing State		
Manual Transmission	<input type="checkbox"/> Yes <input type="checkbox"/> No	Automatic Restriction	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Class	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	Endorsements	<input type="checkbox"/> Tanker <input type="checkbox"/> Doubles/Triples <input type="checkbox"/> HAZMAT <input type="checkbox"/> N/A		
DOT Medical	California Issued	<input type="checkbox"/> YES <input type="checkbox"/> No <input type="checkbox"/> N/A	DOT Medical Expiration Date		
Professional Driving Experience (check all that apply)			<input type="checkbox"/> TSA TWIC – Transportation Worker Identification Credential		
<input type="checkbox"/> Ready Mix Concrete Mixer Truck		<input type="checkbox"/> Doubles/Triples	<input type="checkbox"/> Long Haul / Over The Road	<input type="checkbox"/> Delivery Truck	
<input type="checkbox"/> Garbage Truck		<input type="checkbox"/> Flatbed Truck	<input type="checkbox"/> Bus	<input type="checkbox"/> Heavy Equipment	<input type="checkbox"/> Other: _____
SPECIAL SKILLS, QUALIFICATIONS, AND CONSIDERATIONS					
Summarize special skills and qualifications, volunteer activities, military service, or other activities related to the job you are seeking:					
Equal Employment Opportunity Employer					
Livingston's Concrete is an equal opportunity employer. All participants will be considered without regard to age, race, national origin, religion, disability, sex, or other protected status in accordance with applicable federal and state equal employment opportunity laws. This company will strive to accommodate any physical or mental limitations of employees or applicants in order to accomplish the essential functions of the job.					

AVAILABILITY
 Full Time Part Time Are you available to work overtime as needed? YES NO

 Are you available Monday through Saturday? YES NO Are you available to work night shift? YES NO

 Can you perform the essential functions of the job which you are applying for? YES NO (Reference Job Description)
PREVIOUS EMPLOYMENT**Company 1**

Phone

Address

Supervisor

Job Title

Responsibilities

From
(MM/DD/YY)**To**
(MM/DD/YY)

Reason for Leaving

 May we contact your previous supervisor for a reference? YES NO
Company 2

Phone

Address

Supervisor

Job Title

Responsibilities

From
(MM/DD/YY)**To**
(MM/DD/YY)

Reason for Leaving

 May we contact your previous supervisor for a reference? YES NO
Company 3

Phone

Address

Supervisor

Job Title

Responsibilities

From
(MM/DD/YY)**To**
(MM/DD/YY)

Reason for Leaving

 May we contact your previous supervisor for a reference? YES NO
**List additional employers and reasons for gaps in employment on reverse as needed.*
REFERENCES
 Give names of three persons whom you have known for at least (1) year and who have personal knowledge of your work skills and history. Do not include any relative unless the relative was your employer or manager and is so identified.

Name

Occupation/Relationship

Years Known

Contact Number

REFERRALS

What prompted you to apply here?

If you were referred, please state by whom:

DISCLAIMER AND SIGNATURE

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I request and authorize investigation by Livingston’s Concrete Service of all statements contained in this application. I understand that falsification (including misrepresentation or omission of facts called for) will result of immediate removal of my application from consideration or immediate discharge from employment arising from this application regardless of when such falsification is discovered. I request and authorize Livingston’s Concrete Service to secure information related to this application and my experience, certification and/or licensure from former employers, educational institutions, sources of certification or licensing, and governmental/judicial agencies parties to provide such information to Livingston’s Concrete Service and release them to Livingston’s Concrete Service from any liability arising there from. I understand an offer of employment from Livingston’s Concrete Service may be contingent upon the Company receiving satisfactory information as a result of a criminal conviction inquiry.

If I am employed by Livingston’s Concrete Service, I agree to conform to the rules and regulations of Livingston’s Concrete Service and understand and agree that, except for the employment at-will status, my wages, hours, working conditions, job assignments(s) and compensation rate(s) are subject to change by Livingston’s Concrete Service in its sole discretion. If employed, I understand that my employment can be terminated at will, with or without cause and with or without notice, at any time at the option of Livingston’s Concrete Service or myself. I understand that, other than the President and Vice President of Livingston’s Concrete Service, no manager, supervisor, or representative of Livingston’s Concrete Service has authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to at-will employment; only the President and Vice President of Livingston’s Concrete Service has the authority to make any agreement contrary to the foregoing and then only in writing.

My signature below certifies that, if Livingston’s Concrete Service employs me, I agree to the employment at-will relationship described above. I understand and agree that no person who is either an agent or employee of Livingston’s Concrete Service may modify, delete, vary, or contradict, whether orally or in writing, this at-will relationship. This application contains all the understandings and agreements between me and Livingston’s Concrete Service concerning the nature of employment, if any, by Livingston’s Concrete Service.

Signature

Date

This application is valid for only ninety (90) days from the date signed.
If you wish to be considered for job opening more than ninety (90) days from date signed, please submit a new application.
Applications are secured in a locked file location with limited access by hiring department only and are destroyed after ninety (90) days.