

Employment Application

Thank you for your interest in working with L. M. Sessler Excavating & Wrecking Inc. Before you complete this employment application there are a few things we'd like you to know:

This application was designed to gather specific information about individuals interested in working with L. M. Sessler Excavating & Wrecking Inc. Please answer all of the questions honestly and with the appropriate information. However, please do not provide any information that is not requested on this form. Applicants providing information that is not requested will be automatically rejected and the application destroyed immediately.

An individual will be considered an applicant only after submitting a completed application for an open and available position.

Applications will be kept on file for a period of one (1) year and may be reviewed when a position becomes available – previous applicants may be contacted in order to determine their availability and interest.

L.M. Sessler Excavating & Wrecking is an Equal Opportunity Employer. The Company does not discriminate and will not tolerate discrimination on the basis of a person's race, religion, creed, color, sex, age, national origin, disability, sexual orientation, gender identity or expression, transgender status, gender dysphoria, marital status, family status, pregnancy, military status, veteran status, genetic information including predisposing genetic characteristics or carrier status,; arrest or conviction record, domestic violence victim status, or any other legally protected class or status.

APPLICANT INFORMATION

NAME	DATE			
STREET ADDRESS				
CITY	STATE	ZIP CODE		
PHONE NUMBER	EMAIL			
DATE AVAILABLE	POSITION APPLYING FOR			
ARE YOU LEGALLY ELIGIBLE TO	WORK IN THE U.S.? \Box	YES 🗆 NO		
EDUCATION				
HAVE YOU GRADUATED FROM HIGH SCHOOL, OR RECEIVED A GENERAL EDUCATIONDEVELOPMENT DIPLOMA?Image: Yes Image: Yes I				
NAME OF SCHOOL				
MAJOR	TYPE OF DEGREE			
NAME OF SCHOOL				
MAJOR	TYPE OF D	EGREE		
WORK EXPERIENCE				



PROFESSIONAL REFERENCES

Please list three (3) professional references Name:	_Relationship:		
	Phone Number:		
Name:	_Relationship:		
	_Phone Number:		
Name:	_Relationship:		
Company:	Phone Number:		
	PHONE NUMBER		
	$\underline{\qquad} MAY WE CONTACT? \Box YES \Box NO$		
JOB RESPONSIBILITIES			
REASON FOR LEAVING			
COMPANY NAME	PHONE NUMBER		
ADDRESS			
SUPERVISOR	$\underline{\qquad} MAY WE CONTACT? \Box \ YES \ \Box \ NO$		
START DATEEND DATE			
JOB RESPONSIBILITIES			
REASON FOR LEAVING			



COMPANY NAME	PHON	NE NUMBER		
ADDRESS				
SUPERVISOR		MAY WE CONTACT? \Box YES \Box NO		
START DATE	END DATE			
JOB RESPONSIBILITIES				
REASON FOR LEAVING	ł			
OCCUPATIONAL CERTIFICATIONS (check all that apply)				
□ <u>OSHA:</u> 10 Hour	□ <u>OSHA:</u> 30 Hour	□ <u>CPR/First Aid</u>		
□ <u>Asbestos:</u> Handler	□ <u>Asbestos:</u> Supervisor	□ <u>Lead Certification</u> (<i>Awareness</i> or better)		
□ <u>CDL:</u> Class A	□ <u>CDL:</u> Class B	· · · · · · · · · · · · · · · · · · ·		
□ Other:				

DISCLAIMER & CERTIFICATION

DISCLOSURE OF A CRIMINAL CONVICTION – I understand that a conviction will not necessarily result in disqualification for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules, and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment, nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at-will and that either I or the employer may terminate my employment at any time with or without notice or cause as long as the employer does not discriminate based on a protected category.

I understand that no manager or representative of the company, other than the president, or an authorized designee, has any authority to enter into any agreement for employment for any specified period of time or make any agreement contrary to the foregoing either now, in the past or in the future. I further understand that such an agreement must be in writing and signed by the president for it to be binding on either myself or the company. I further understand that this statement supersedes any prior oral or written understanding and bars any future oral understanding to the contrary.

By signing this application, I declare that the information provided by me is complete and true to the best of my knowledge. I authorize L. M. Sessler Excavating & Wrecking Inc., or a party acting on behalf of L. M. Sessler Excavating & Wrecking Inc., to verify their accuracy and to obtain reference information on my work performance. I hereby release L. M. Sessler Excavating & Wrecking Inc., and all parties authorized to work on their behalf, from any/all liability of whatever kind and nature which, at any time, could result from obtaining, and having an employment decision based on, such information. I understand that any misrepresentation or omission on this application may preclude me from receiving an offer of employment, may result in the withdrawal of an employment offer, or may result in my discharge from employment if I am already employed at the time the misrepresentation or omission is discovered.

APPLICANT SIGNATURE

DATE _____