

EMPLOYMENT APPLICATION FORM

P.O. Box 5963 Virginia Beach, VA 23471 O: 757.395.4499 F: 757.395.4461

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE						
APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS						
PLEASE COMPLETE	PAGES 1-5.				Date:	
Name:						
Last	First		Middle		Maiden	
Present Address:						
Number	Street	Ci	ty	(State Z	ip
How Long:			S	ocial S	ecurity No.:	
Telephone:						
Are you eligible to work in the United States? YES NO If under 18, please list age:						
Have you ever been employed by D&M Concrete Construction Inc.? ☐ Yes ☐ No If yes, dates of employment & reason for living:						
Are you related to any current D&M Concrete Construction Inc. employee? ☐ Yes ☐ No If yes, their name & their relationship to you:						
Position Applied For:				Day	s/Hours Available	to Work:
Salary Desired:				Mon Tue	Pref Thur Fri Sat _ Sun	
How many hours can you work weekly? Can you work nights?						
Employment Desired: □ FULL-TIME ONLY □ PART-TIME ONLY □ FULL- OR PART-TIME						
When available for work?						
EDUCATION & OTHER INFORMATION						
TYPE OF SCHOOL	NAME OF SCHOOL	(Comple	LOCATION ete mailing ad	dress)	NO. OF YEARS COMPLETED	MAJOR & DEGREE
High School					1	
College						
Bus. or Trade School						
Professional School						

Have you ever been convicted of a crime?						
If yes, explain number of conviction(s), natu	re of o	☐ No offense(s) leading to co	☐ Yes priction(s), how recently			
such offense(s) was/were committed, senter						
Do you have a driver's license?						
•		☐ Yes	□ No			
What is your means of transportation to wor	What is your means of transportation to work?					
Driver's License Number: State of issue			1.1/001) 5.01 //			
Expiration Date:		☐ Operator ☐ Comm	nercial (CDL)			
-						
Have you had any accidents during the past	three	years?	How many?			
Have you had any moving violations during	the pa	ast three years?	How Many?			
Certifications						
Are you currently CPR certified?	Are	you currently certified to be a Flagger?				
☐ Yes ☐ No	□ Y	′es □ No				
Do you currently or have you ever held a RapidGate certification? Yes No	you currently or have you ever held a TWIC card? les □ No les, expiration:					
If yes, has it ever been revoked? ☐ Yes ☐ No If yes, has it ever been revoked? ☐ Yes ☐ No						
How did you learn about this employment օլ	oportu	unity at D&M Concrete	Construction Inc.?			
☐ Craigslist ☐ Website ☐ Newspaper ☐ Er	nploye	ee Walk-in Other:				
Please list two references oth	er tha	an relatives or previous	s employers.			
Name:		Name:				
Position:		Position:				
Company:		Company:				
Address:		Address:				
Telephone: Telephone:						
An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to add any additional information necessary to describe your full qualifications for the specific position for which you are applying.						

MILITARY						
Have you ever been in the	ne armed forces?					
		☐ Yes	□ No			
Are you now a member of the national guard? ☐ Yes ☐ No						
Specialty	Date Entered		Discharge Date			
Work Experience	Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.					
	Job Or	e				
Name of Employer:	Name of Last Super	visor	Employment Dates	Salary		
Complete Address:			From:	Start:		
			То:	Final:		
Phone Number:	Your Last Job Title:					
Reason for Leaving (be	specific):					
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.						
Job Two						
Name of Employer:	Name of Last Super	visor:	Employment Dates	Salary		
Complete Address:			From:	Start:		
			То:	Final:		
Phone Number:	Your Last Job Title:					
Reason for Leaving (be specific):						
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.						

	Job Three					
Name of Employer:	Name of Last Supervisor:	Employment Dates	Salary			
Complete Address:		From:	Start:			
		То:	Final:			
Phone Number:	Your Last Job Title:					
Reason for Leaving (be specific):					
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.						
May we contact your present en						
	□ Yes	□ No				
Did you complete this application	on yourself?	□ No				
If not, who did?						

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by D&M Concrete Construction, Inc. (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of D&M Concrete Construction, Inc., or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and D&M Concrete Construction, Inc. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of Applicant

Date:

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.