

3440 Sojourn Dr., Suite 150, Carrollton, Texas 75006

APPLICATION FOR EMPLOYMENT

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, non-job related disability, or any other protected group status.

Application Date:	If referred, by who:						
	Applicant Information						
Applicant's Full Name:	Home Phone:						
Applicant's Home Address:	Cell Phone:						
Email Address:	Gender:						
Date of Birth:	Social Security #:						
Driver's License Number and State of Iss	uance: Expiration:						
Have you ever been convicted of a criminal offense (felony or misdemeanor)? If yes, state nature of the crime(s), when and where convicted and disposition of the case.							
Do you have the legal right to work in the United States? Yes No Are you prevented from lawfully becoming employed in the Yes No United States because of VISA or immigration status? (Proof of citizenship or immigration status will be required upon employment) Do you have any family members employed by Texas Heavy Civil, LLC? Yes No If so, name and relationship: Have you worked for this company before? Yes No If Yes, position? Dates: From To Reason for Leaving:							
	Employment Desired						
Position Applying For:	Date Available:						
Pay Wage Desired:							

Military Service							
Branch:	Dates of Service:						
Rank:		Active in National Guard or Reserves? Yes No					No
				Education			
Type of School		Nam	e and Location		Subjects/Degrees	Did you Graduate	# of Years Attended
High School						Yes / No	
College						Yes / No	
Trade/Business School						Yes / No	
			Emp	loyment Histor	У		
				ployers, starting wit		- 1	
	Em	ployer			Dates of Employment		
	Ac	dress			Name of Last Supervisor and Phone Number		
Last Posi	ition Held		Salary / Wage		Reason for Leaving		
May we contact thi	is employer?	Yes	No If No	o, why			
	Em	ployer	,		Dates of Employment		
					From: To:		
	Ac	ddress			Name of Last Supervisor and Phone Number		
			Page of faul assista				
Last Posi	ition Held	3	Salary / Wage		Reason for Leav	/ing	
May we contact this employer? Yes No If No, why							
Employer			Dates of Employment				
			From: To:				
	Address			Name of Last Super	visor and Phon	e Number	
Last Position Held Salary / Wage				Reason for Leav	ing		
Last Fosi	ition neid		Jaiai y / Wage		Neason for Leav	/IIIg	
May we contact thi	is employer?	Yes	No If No	o, why			
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	Experience						
Indicate length (years/months) of experience in any of the following areas.							
Construction Labor	Excavator/Backhoe Operator	Scraper Operator					
Field Foreman	Rubber Tire Loader Operator	Grade Checker					
Shop Foreman	Bulldozer Operator	Water Truck					
Mechanic	Finish Dozer Operator	Lube Truck					
Truck Mechanic	Motor Grader Operator	Dump Truck					
The company, in considering my application for employment, may verify the information set forth on this application and obtain additional background information relating to my previous employment, previous drug and alcohol test results, and driving record. I authorize all persons, schools, companies, corporations, credit bureaus and law enforcement agencies to supply any information concerning my background. I certify that all the information on this							
application is true and complete, and I understand that if any false information, omissions, or misrepresentations are							
discovered, my application may be rejected and/or, if I am employed, my employment may be terminated at any							
time. In consideration of my employment, I agree to conform to Texas Heavy Civil, LLC rules and regulations, and I							
agree that my employment and compensation can be terminated, with or without cause, and with or without notice,							
at any time, at either my or Texas Heavy Civil, LLC option. I also understand and agree that the terms and conditions							
of my employment may be changed, with or without cause, and with or without notice at any time by Texas Heavy							
Civil, LLC. I understand that Texas Heavy Civil, LLC has a commitment to maintain an alcohol/drug-free workplace							
and that Texas Heavy Civil, LLC may require a drug screening test as part of its selection and hiring process. I further							
understand and agree that if I am employed, I may be required to submit to alcohol/drug testing under certain							
circumstances during my employment.							

Date:

Applicant's Signature: