



# EMPLOYMENT APPLICATION

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We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion or national origin.

### PERSONAL INFORMATION

NAME: \_\_\_\_\_ SS#: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PERMANENT ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ REFERRED BY: \_\_\_\_\_

CAN YOU, AFTER EMPLOYMENT, SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE U.S.? YES  NO

ARE YOU PRESENTLY A MEMBER OF THE NATIONAL GUARD OR RESERVES? YES  NO

### EMPLOYMENT DESIRED

POSITION: \_\_\_\_\_ DATE YOU CAN START: \_\_\_\_\_ SALARY DESIRED: \_\_\_\_\_

ARE YOU CURRENTLY EMPLOYED? YES  NO  IF SO, MAY WE CONTACT YOUR CURRENT EMPLOYER? YES  NO

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? YES  NO  IF YES, WHEN?: \_\_\_\_\_

EDUCATION	NAME & LOCATION	DID YOU GRADUATE?	SUBJECT STUDIED/DEGREE(S) EARNED
GRAMMAR SCHOOL:	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
HIGH SCHOOL:	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
COLLEGE:	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
TRADE OR OTHER SCHOOL:	_____	YES <input type="checkbox"/> NO <input type="checkbox"/>	_____

### DRIVING RECORD

HAVE YOU EVER BEEN DENIED A LICENSE, PERMIT OR PRIVILEGE TO OPERATE A MOTOR VEHICLE? YES  NO

HAS ANY LICENSE, PERMIT OR PRIVILEGE EVER BEEN SUSPENDED OR REVOKED? YES  NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES  NO  (A CONVICTION WILL NOT NECESSARILY DISQUALIFY YOU FOR EMPLOYMENT)

LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_ LICENSE TYPE: \_\_\_\_\_ ENDORSEMENTS: \_\_\_\_\_ EXPIRATION: \_\_\_\_\_

### DRIVING EXPERIENCE (CHECK ALL THAT APPLY)

#### CLASS OF EQUIPMENT:

- STRAIGHT TRUCK
- TRACTOR AND SEMI-TRAILER
- TRACTOR AND TWO TRAILERS
- OTHER: \_\_\_\_\_

#### TYPE OF EQUIPMENT:

- SEMI BOTTOM DUMP | How Long? \_\_\_\_\_ Total Miles: \_\_\_\_\_
- DOUBLE BOTTOM DUMP | How Long? \_\_\_\_\_ Total Miles: \_\_\_\_\_
- END DUMP | How Long? \_\_\_\_\_ Total Miles: \_\_\_\_\_
- OTHER: \_\_\_\_\_ | How Long? \_\_\_\_\_ Total Miles: \_\_\_\_\_

#### TYPE OF TRANSMISSION:

- 10 SPEED
- 13 SPEED
- 15 SPEED
- 2 STICK

### PHYSICAL RECORD

DO YOU HAVE ANY PHYSICAL CONDITION OR HANDICAP, WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR? YES  NO

IF YES, WHAT CAN BE DONE TO ACCOMMODATE YOUR LIMITATION?: \_\_\_\_\_

HAVE YOU EVER HAD A BACK INJURY?: YES  NO  IF YES, PLEASE EXPLAIN: \_\_\_\_\_

EMERGENCY CONTACT: NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above and separately to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you, I understand and agree that, if hired, my employment is "at will" and for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause."

Signature \_\_\_\_\_

Date \_\_\_\_\_

Interviewed by \_\_\_\_\_

Date \_\_\_\_\_