

# EMPLOYMENT APPLICATION

## **Allegheny Excavating, Inc.**

1010 Clearsprings Drive, Suite 100

Cranberry Township, PA 16066

(Phone) 724-935-2400

(Fax) 724-935-3233

**APPLICANT NAME:** \_\_\_\_\_

# Allegheny Excavating, Inc.

1010 Clearsprings Drive, Suite 100, Cranberry Township, PA 16066 (Phone) 724-935-2400 , (Fax) 724-935-3233

## COMPANY HIRING POLICY

1. All applications are the property of Allegheny Excavating, Inc. and are not to leave this office under any circumstances and will be enforced by law. There will be no exceptions.
2. Applications will be accepted on Tuesdays only from 9:00am to 5:00pm. All Applicants must complete applications in Allegheny Excavating, Inc. exclusively. There will be no exceptions to this rule.
3. We hire applicants solely based upon merit. We do not discriminate on the basis of union affiliation, race, sex, color, age, national origin, disability, or any other protected status.
4. No employee is required to pay dues to any labor organization to join our company.
5. When openings become available, we reserve the right to review applications already on file, prior to hiring. Applications remain on file for 60 days. It is the applicant's responsibility to keep our hiring personnel informed of his/her availability.
6. We do not accept group applications or photocopied forms. We hire based on personal contact with individuals so that we can make sound business judgments as to the most qualified applicants.
7. All applicants must appear in person and fill out the required application in person at the Company's office before they can be considered for employment.
8. Preference in hiring is given on the basis of: (a) our employees that were laid off, (b) former employees whose work was satisfactory and, (c) applicants who have the necessary skills or meet the experience requirements for the job.
9. Any applicant who falsifies or omits information on the application is disqualified from being hired. If the employee has been hired before the falsification or omission is discovered, he/she is subject to termination.
10. We base our hiring decisions on a variety of factors, including skills and the ability to perform the job, prior to employment with us, employment references as to character or willingness to work, and willingness to accept the offered salary and personal interviews.
11. Full-time employees are expected to work only for us and must state that they will not be employed by any other employer while they work for us.
12. All applicants to be considered must fill out our applications on the Company provided application forms (which meet regulatory standards for non-discrimination). Resumes or applications other than on Company provided forms will not be considered or retained.
13. The complete work history on any application must be completely filled out chronologically. Merely stating "references upon request", or working out of an employment source will not be acceptable unless every employer is individually listed and the date during which an applicant was employed by them is listed. If more space is needed, attach an additional sheet. If the job history is not completely and specifically listed, the application will not be retained.
14. Employees are generally hired at a starting rate and must accept the rate of pay of the entry job.
15. When qualifications are relatively equal, the date of the receipt of the application will be considered.
16. The "Position Applied For" block must be completed with the actual position title for the job you are applying for.

Effective: 12-28-94  
Revised: 4-21-2004  
Revised: 1-27-2012

# Allegheny Excavating, Inc.

| APPLICANT INFORMATION                                                                                                                                                                                                                                                      |       |                     |                  |                             |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------|------------------|-----------------------------|--|
| Last Name                                                                                                                                                                                                                                                                  | First | M.I.                | Date             |                             |  |
| Street Address                                                                                                                                                                                                                                                             |       |                     | Apartment/Unit # |                             |  |
| City                                                                                                                                                                                                                                                                       |       | State               |                  | ZIP                         |  |
| Phone                                                                                                                                                                                                                                                                      |       | E-mail Address      |                  |                             |  |
| Date Available                                                                                                                                                                                                                                                             |       | Social Security No. |                  | How Did You Learn About Us? |  |
| Position Applied for                                                                                                                                                                                                                                                       |       |                     |                  |                             |  |
| 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?                                                                                                                                                            |       |                     |                  |                             |  |
| Have you ever been convicted of a felony?    YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain                                                                                                                                                      |       |                     |                  |                             |  |
| Are You Currently on 'Lay-Off' Status and Subject to Recall?    YES <input type="checkbox"/> NO <input type="checkbox"/> If Under 18 Years of Age, Can You Provide Required Proof of Your Eligibility to Work?    YES <input type="checkbox"/> NO <input type="checkbox"/> |       |                     |                  |                             |  |
| Can You Travel if the Job Requires It?    YES <input type="checkbox"/> NO <input type="checkbox"/>                                                                                                                                                                         |       |                     |                  |                             |  |
| If You Are Currently Employed, May We Contact Your Present Employer?    YES <input type="checkbox"/> NO <input type="checkbox"/> Availability:    Full Time / Part Time / Shift Work / Temporary                                                                           |       |                     |                  |                             |  |

| EDUCATION          |    |                   |                              |                             |        |
|--------------------|----|-------------------|------------------------------|-----------------------------|--------|
| <u>High School</u> |    |                   | Address                      |                             |        |
| From               | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |
| <u>College</u>     |    |                   | Address                      |                             |        |
| From               | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |
| <u>Other</u>       |    |                   | Address                      |                             |        |
| From               | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |
|                    |    |                   |                              |                             |        |

| PREVIOUS EMPLOYMENT                                                                                                  |    |                    |              |                  |  |
|----------------------------------------------------------------------------------------------------------------------|----|--------------------|--------------|------------------|--|
| <u>Company</u>                                                                                                       |    |                    | Phone (    ) |                  |  |
| Address                                                                                                              |    |                    | Supervisor   |                  |  |
| Job Title                                                                                                            |    | Starting Salary \$ |              | Ending Salary \$ |  |
| Responsibilities                                                                                                     |    |                    |              |                  |  |
| From                                                                                                                 | To | Reason for Leaving |              |                  |  |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> |    |                    |              |                  |  |

|                                                                                                                   |                    |                    |  |
|-------------------------------------------------------------------------------------------------------------------|--------------------|--------------------|--|
| <u>Company</u>                                                                                                    |                    | Phone ( )          |  |
| Address                                                                                                           |                    | Supervisor         |  |
| Job Title                                                                                                         | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities                                                                                                  |                    |                    |  |
| From                                                                                                              | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |
| <u>Company</u>                                                                                                    |                    | Phone ( )          |  |
| Address                                                                                                           |                    | Supervisor         |  |
| Job Title                                                                                                         | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities                                                                                                  |                    |                    |  |
| From                                                                                                              | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |
| <u>Company</u>                                                                                                    |                    | Phone ( )          |  |
| Address                                                                                                           |                    | Supervisor         |  |
| Job Title                                                                                                         | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities                                                                                                  |                    |                    |  |
| From                                                                                                              | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |
| <b>REFERENCES</b>                                                                                                 |                    |                    |  |
| <i>Please list three professional references.</i>                                                                 |                    |                    |  |
| <u>Full Name</u>                                                                                                  |                    | Relationship       |  |
| Company                                                                                                           |                    | Phone ( )          |  |
| Address                                                                                                           |                    |                    |  |
| <u>Full Name</u>                                                                                                  |                    | Relationship       |  |
| Company                                                                                                           |                    | Phone ( )          |  |
| Address                                                                                                           |                    |                    |  |
| <u>Full Name</u>                                                                                                  |                    | Relationship       |  |
| Company                                                                                                           |                    | Phone ( )          |  |
| Address                                                                                                           |                    |                    |  |

**SKILLS**

Indicate any foreign languages you can speak, read, and/or write.

Describe any specialized trainings, apprenticeships, skills and extra-curricular activities.

List professional, trade, business or civic activities and offices held. (You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.)

Summarize special job-related skills and qualifications acquired from employment or other experience.

Describe your experiences with production/mobile machinery, equipment and tools.

State any additional information you feel may be helpful to us in considering your application.

**MILITARY SERVICE**

Branch

From

To

Rank at Discharge

Type of Discharge

If other than honorable, explain

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an 'at will' nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with our without cause. It is further understood that this 'at will' employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I understand, also, that I am required to abide by all rules and regulations of the Employer.

Signature

Date

**FOR PERSONNEL DEPARTMENT USE ONLY**

Arrange Interview:     YES     NO

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employed:     YES     NO                      Date: \_\_\_\_\_

Job Title: \_\_\_\_\_    Hourly Rate/Salary: \_\_\_\_\_    Department: \_\_\_\_\_

Signature

Date

TITLE

Additional Notes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_