



**R.J.Zavoral & Sons, Inc**  
**PO Box 435**  
**East Grand Forks, MN 56721**  
**(218) 773-0586**

# APPLICATION FOR EMPLOYMENT

**An Equal Opportunity Employer**

Note: If you require more space than provided, please attach separate sheet(s).

## PERSONAL

Name (Last)	(First)	(M.I.)	Home Phone	
Address			Cell Phone	Best Time to Call
City	State	Zip		

Today's Date:
Referred By:
Position Applied For:

## EDUCATION

Name and Location	Areas of Study	Graduate		Degree
High School		Yes	No	
College		Yes	No	
Post High School/Technical Training		Yes	No	

On what date would you be available for work? \_\_\_\_\_

Are you currently on a "lay-off" status and subject to recall?      Yes      No

Applying for:                      Full Time                      Part Time                      Shift Work                      Temporary

Days & Times available for work:   M          T          W          Th          F          Sa          Su  

Are you at least 18 years of age?              Yes      No

## JOB RELATED SKILLS:

Truck Driving Experience	Type:	Years:
Equipment Operating Experience	Type:	Years:
Other: ie, Computers, Software...	Type:	Years:

## DRIVER'S LICENSE INFORMATION:

Do you have a valid drivers license?	Yes	No	Class (please circle one)	A	B	C	D
Do you have a Medical Examiner's Certificate?	Yes	No	If Yes, Date of Expiration:				
CDL:      Yes      No	Hazmat:	Yes	No	Drivers License Number:		State of Issue:	
	Tanker:	Yes	No				

## CERTIFICATIONS:

Are you CPR Certified?	Yes	No	Date Certificate Expires:
Are you First Aid Certified?	Yes	No	Date Certificate Expires:
Hours of Safety Training :	Date of Training:	Hours of OSHA Training:	Date of Training:

## PHYSICAL HISTORY:

Do you have any physical conditions which may limit your ability to perform the job applied for?      Yes      No

If yes, please explain: \_\_\_\_\_

What can be done to accommodate your limitation? \_\_\_\_\_

Would you be willing to take a physical examination? \_\_\_\_\_

## PRE-EMPLOYMENT DRUG TESTS CONDUCTED

**REFERENCES:** Include only individuals familiar with your work experience. Do not include relatives.

Name	Position	Company	Address	Phone	Yrs Known

Military Service Experience: \_\_\_\_\_ Duties: \_\_\_\_\_ Discharge Date: \_\_\_\_\_

Are you a: Special Disabled Veteran?      Yes      No      Viet-Nam Era Veteran?      Yes      No

Are you currently employed?      Yes      No      May we contact your present employer?      Yes      No

**EMPLOYMENT HISTORY (MOST RECENT EMPLOYER)**

From	To	Employer	Phone	Address
Job Title		Duties		City, State
Supervisor's Name				
Start Pay	Final Pay	Reason For Leaving		

From	To	Employer	Phone	Address
Job Title		Duties		City, State
Supervisor's Name				
Start Pay	Final Pay	Reason For Leaving		

From	To	Employer	Phone	Address
Job Title		Duties		City, State
Supervisor's Name				
Start Pay	Final Pay	Reason For Leaving		

**Applicant's Statement**

I certify that all information given is accurate and true. I understand that if hired, any false information on this form could be cause for termination. I authorize RJ Zavoral & Sons, Inc to obtain and give references as well as to verify my information such as credit history, DMV records, employment, and education as needed for arriving at an employment decision. I understand that RJ Zavoral & Sons, Inc utilizes "employment-at-will", i.e., the employee or the Employer may terminate the employment relationship at any time for any reason other than an unlawful or discriminatory reason.

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR PERSONNEL DEPARTMENT USE ONLY**

Arrange Interview?    Yes\_\_\_\_    No\_\_\_\_      Interviewer \_\_\_\_\_      Date \_\_\_\_\_

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

Start Date: \_\_\_\_\_

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

By: \_\_\_\_\_      Date: \_\_\_\_\_  
 Name and Title