

License: A B C D E None
Date / /

For office use only:

Communication Manpower, Incorporated



Communication Manpower, Inc.
Chipley, Florida

WE ARE A DRUG-FREE WORKPLACE

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Please fill in date at left

Name _____ SS# _____ - _____ - _____
(Exactly as shown on social security card)

Current Address _____

City _____ State _____ Zip Code _____ Phone (____) _____ - _____

Addresses _____ How Long? _____

For Past (Street) (City) (State & Zip Code)

Three Years (Street) (City) (State & Zip Code) How Long? _____

BACKGROUND INFORMATION

Are you a US citizen? Yes No (circle one)

If "no", do you possess an alien registration card? Yes No (circle one)

Alien Registration No. _____

Have you been convicted of a crime in the past ten years excluding misdemeanors and summary offenses which have not been annulled, expunged and sealed by court? Yes No (circle one)

If "yes", describe in full _____

PERSONAL REFERENCES (Not Relatives)

Name	Address	Occupation	Phone

Who should be notified in case of emergency? (Name, address, phone no., relation to you) _____

How did you hear of our company? _____

EDUCATION

School name	GED/Diploma/Certificate or Highest Grade Completed	Date Completed

DRIVERS LICENSES:

State	License #	Type	Endorsements	Restrictions	Expiration Date

ACCIDENT RECORD FOR PAST 3 YEARS OR MORE (attach sheet if more space needed)

	Dates	Nature of Accident (Head-on, rear-end, upset, etc.)	Fatalities	Injuries
Last Accident				
Next Previous				
Next Previous				

TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS (OTHER THAN PARKING VIOLATIONS)
Attach sheet if more space is needed.

Location	Date	Charge	Penalty

CDL DRIVING EXPERIENCE: (complete only if you now have a CDL license)

Birthdate: ___ / ___ / ___	Type of Equipment (Van, Tank, Flat, etc.)	Dates		Approximate # of Miles Total
		From	To	
Straight Truck				
Tractor & Semi Trailer				
Tractor - Two Trailers				
Other (Specify)				

List special courses or training that will help you as a driver (attach a copy)

- A. Have you ever been denied a license, permit or privilege to operate a vehicle? Yes No (circle one)
 B. Has any license, permit or privilege ever been suspended or revoked? Yes No (circle one)
 IF ANSWER TO EITHER A OR B IS YES, GIVE DETAILS IN THE SPACE PROVIDED BELOW.

- C. Do you have a valid license at this time? Yes No (circle one)
 IF ANSWER TO C IS NO, GIVE DETAILS IN THE SPACE PROVIDED BELOW.

PREVIOUS EMPLOYMENT EXPERIENCE

Present or Last Employer:					
Supervisor's Name:		Phone:			
Address:					
Position Held:		From:		To:	
Salary:					
Reason for Leaving:					

Previous Employer					
Supervisor's Name:		Phone:			
Address:					
Position Held:		From:		To:	
Salary:					
Reason for Leaving:					

Previous Employer					
Supervisor's Name:		Phone:			
Address:					
Position Held:		From:		To:	
Salary:					
Reason for Leaving:					

Have you filed an application here before? Yes No (circle one) Date _____

Have you been employed here before? Yes No (circle one) Dates _____

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge:

Signature _____ Print Name _____ Date _____

JOB INFORMATION (Please READ and SIGN Job Description Insert Attached)

Construction Crew (Insert 1) Shop Personnel (Insert 2) Office Personnel (Insert 3) Other Personnel (Insert 4)

For what job are you applying? _____

Will you be able to meet the requirements of the job as described? Yes No (circle one)

Are you willing to work out of town? Yes No (circle one)

Skills

List any trade, skills and/or abilities which you possess that you believe to be relevant to the position you seek.



Job Description for Splicers

Job requires but is not limited to the ability to dig to a minimum depth of 5 feet with a shovel or hole digger; climb up and down a height of 4 feet using two steps; work with weights 100+- pounds while rotating body up to 180 degrees; lift up to 100 pounds over head; set out construction signs; operate 2-inch water pump, 8 horse-power Griggs & Stratton engine; use hand tools; work in a manhole; walk up to 3 miles per day. Job requires outdoor work up to 52 weeks/year; working out-of-town up to 7 nights/7 days per week; providing own transportation to and from job site and on job. Job requires valid driver's license.

Time starts when you get to the job and ends when you leave the job.

You must be able to read and write including road maps, signs and directions; operate light and medium equipment; locate utilities using cable-hound, pipe-horn, etc.; repair underground services and utility lines as necessary; splice cable (all sizes and types); use test set and all related splicing tools; have mechanical capabilities; ability to work unsupervised and assume leadership on job site; must possess management and organizational skills; be responsible for operation and maintenance of splicing equipment; possess computational capabilities; maintain cordial customer relations; prepare time sheets and reports; interpret work prints.

PLEASE READ, INITIAL, AND SIGN STATEMENTS BELOW

I understand that I may be required to undergo blood and/or urinalysis screening for drug or alcohol use as part of the pre-employment process. In addition, all employees are subject to blood and/or urinalysis screening for drug or alcohol use. At the time of any such screening, I will be required to execute all forms of consent and release of liability. I understand that the results of such screening will be made available to the company, its employees or agents. **Initials** _____

I understand that my employer has a policy that employees under the influence of alcohol or chemical substances during working hours may be immediately discharged. I agree that under appropriate circumstances, particularly if I am involved in an accident during working hours, I may be required and will submit to a test administered by a qualified authority that will determine if alcohol or chemical substances are present. I understand that positive results of this test can affect my eligibility for workers' compensation benefits. I further understand that employment and continued employment depends upon my agreement to submit at any time and without prior notice to a drug/alcohol screen. I further understand that refusal to submit voluntarily to such a test or the detection of the presence of alcohol or drugs by such a test may result in my immediate discharge. This policy has been read by me and I fully understand it. **Initials** _____

I do hereby authorize my employer or representative of my employer to obtain medical reports, records or tests which indicate the presence of alcohol or chemical substances in my body. **Initials** _____

I agree that a Photostat copy of this authorization be accepted if necessary. **Initials** _____

I certify that all information given on this employment application, any resume that I submit to the company and any related papers and answers given during oral interviews are true and correct. I authorize the giving and receiving of any such information requested by Trawick Construction during the course of an investigation of my work and personal history. I understand that falsification of any information given by others during the course of an investigation or any derogatory information discovered as a result of this investigation may subject me to immediate dismissal. I hereby release from liability all persons who provide information to my employer during the course of any such investigation. **Initials** _____

I understand that Communication Manpower, Inc., Co. is an at-will employer and that all employees are free to terminate their employment at their will. Similarly, the Company has the right to terminate employment at any time, with or without cause. **Initials** _____

Signature _____ Print Name _____ Date _____

I have read the above job description and I will be able to perform the job.

Signature _____ Date _____

Witness to all signatures _____ Date _____

Thank you for your interest in our Company