



26503 Eleven Road • Montezuma, KS 67867 • Off: 800-536-2634 • Fax: 620-846-2322
www.maxjantzexcavating.com

Today's Date _____ Desired Position _____

Date of Birth _____ Referred By _____

Your Name _____
(First) (Middle) (Last)

Address _____
City, State, _____
Zip _____

Phone Number _____ Alternate Number _____

Personal Information

Social Security Number..... - -

Are you over 18? (circle one)..... Yes No

Are you willing to work 50-70 hours per week on a regular basis?.....Yes No

Are you willing to relocate?.....Yes No

What language do you speak fluently? (circle one or more)

English Spanish Other _____

General Information

Do you have a valid driver's license?(circle one)..... Yes No

If yes, what is your driver's license number? _____

State _____ Class _____ Expiration Date _____

Are you a veteran?(circle one).....Yes No

Have you ever been convicted of a crime?(besides a traffic violation)(circle one)..... Yes No

If yes, please explain:

OFFICE USE ONLY:

START DATE: _____ PAY RATE: _____ CREW: _____

Experience

Please circle any of the following in which you are competent.

Years of
Experience

Operator: Bulldozer - Motor Grader - Scraper - Loader _____

Craft Worker: Carpenter - Form Builder - Pipe Layer - Concrete Finisher _____

Laborer: Heavy - Light _____

Shop Worker: Welder - Mechanic - Heavy Equipment - Auto _____

Truck Driver: Buses - Trucks - Truck Tractors - Semi Trailers - Fuel Trailers Pole Trailers _____

Clerical: Receptionist - Payroll - Accounts Payable - Computer - Human Resources - Benefits - Runner

Other: _____ _____

Is there anything we can do to reasonably accommodate any special need or disability you may have?.....Yes No

If yes, please explain: _____

Employment History

Please list your employment history beginning with your current employer or most recent. Include at least the last three years of your work history.

1. _____
 Name of Employer Address City Phone

 Name of Supervisor Your Position Dates employed to from
 Reason for leaving

2. _____
 Name of Employer Address City Phone

 Name of Supervisor Your Position Dates employed to from
 Reason for leaving

Fair Credit Reporting Act Disclosure Statement

In accordance with the provisions of Section 604(b)(2)(A) of the Fair Credit Reporting Act, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter I, of Public Law 104-208), you are being informed that reports verifying your previous employment, previous drug and alcohol test results, and your driving record may be obtained on you for employment purposes. These reports are required by Sections 382.413, 391.23, and 391.25 of the Federal Motor Carrier Safety Regulations.

Applicant's Signature

Date

Print Name

Social Security Number