



Palouse River Rock  
 120 South Main Street  
 Colfax, WA 99111  
 509.397.3556 (office)  
 509.592.5887 (cell)

## EMPLOYMENT APPLICATION:

Disclaimer
<p>The Employment Relationship between Palouse River Rock and its Employees is At-Will and Voluntary.            This application is NOT a Contract.            Palouse River Rock will keep this application on file for 30 Days.</p>

## GENERAL INFORMATION:

Name:			
Address	City	State	Zip
Phone Number:		E-mail Address	
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you legally eligible to work in the United States? (If offered employment, you are required to provide documents that verify eligibility.) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you 18 years Old? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever been convicted of a Felony? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Past Addresses:</b>			
Street	City	State & Zip	How Long?

## POSITION:

Position you are applying for:		
Available Start Date:	Desired Pay:	
Do you have a Valid Driver's License <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have reliable Transportation <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have a Valid CDL <input type="checkbox"/> Yes <input type="checkbox"/> No	Drivers License #	Expiration Date
Employment Desired: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time (_____.Hrs/week) <input type="checkbox"/> Seasonal/Temporary		



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### DRIVING EXPERIENCE

Class of Equipment	Type of Equip. (Gravel, Grain, Van, Tank, Flat, Etc).	Dates		Approx # of Miles
		From	To	
Straight Truck				
Tractor/Semi-Trailer				
Tractor/2 Trailers				
Other:				
Have you ever been denied a license, permit, or privilege to operate a motor vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No		Has any license, permit, or privilege ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes, explain:		If Yes, explain:		

### ACCIDENT RECORD (FOR PAST 7 YEARS)

Date	Nature of Accident	Fatalities	Injuries	Citation

### TRAFFIC CONVICTIONS AND FOREFITURES (FOR THE PAST 3 YEARS)

Date	Location	Charge	Penalty



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## EDUCATION

High School Name	Location	Years Attended	Diploma	
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
College and/or Vocational School Name	Location	Years Attended	Degrees Earned	
List any special skills, qualifications, certifications, applicable course work or training:				

## REFERENCES (Business & Professional Only)

Name	Title	Company	Phone	E-mail



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**EMPLOYMENT HISTORY** (Please start with your present or most recent position.)

Note: DOT requires that employment for a least 3 years and/or Commercial Driving experience for the past 10 years be shown.

Employer 1	Job Title:	Dates Employed:	
Address	City	State	Zip
Supervisor's Name & Title:		May we contact this employer for a reference: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Starting Pay:		Ending Pay:	
Reason for Leaving:			
Describe Work Performed:			

Employer 2	Job Title:	Dates Employed:	
Address	City	State	Zip
Supervisor's Name & Title:		May we contact this employer for a reference: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Starting Pay:		Ending Pay:	
Reason for Leaving:			
Describe Work Performed:			



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**EMPLOYMENT HISTORY** (Continued)

Employer 3	Job Title:	Dates Employed:	
Address	City	State	Zip
Supervisor's Name & Title:		May we contact this employer for a reference: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Starting Pay:		Ending Pay:	
Reason for Leaving:			
Describe Work Performed:			

Employer 4	Job Title:	Dates Employed:	
Address	City	State	Zip
Supervisor's Name & Title:		May we contact this employer for a reference: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Starting Pay:		Ending Pay:	
Reason for Leaving:			
Describe Work Performed:			



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## List of Experience:

*(Please Complete the Following by checking the column that closest describes your experience and add comments)*

Skill	Experience					Hrs / Yrs	Comments
	None	Some	Lots				
	1	2	3	4	5		
Supervision	1	2	3	4	5	/	
Project Estimating/Budgeting	1	2	3	4	5	/	
Survey/Stakeout/Building Layout	1	2	3	4	5	/	
Equipment Operation: Excavator	1	2	3	4	5	/	
Equipment Operation: Dozer	1	2	3	4	5	/	
Equipment Operation: Skid Steer	1	2	3	4	5	/	
Equipment Operation: Grader	1	2	3	4	5	/	
Equipment Operation: Loader	1	2	3	4	5	/	
Equipment Operation: Compaction	1	2	3	4	5	/	
Equipment Operation: Farm Equip.	1	2	3	4	5	/	
Equipment Operation: Other	1	2	3	4	5	/	
Labor: Grade Checking	1	2	3	4	5	/	
Labor: Establish/Set Grade	1	2	3	4	5	/	
Labor: Program Slope Laser	1	2	3	4	5	/	
Labor: Pothole Utilities	1	2	3	4	5	/	
Labor: Shovel	1	2	3	4	5	/	
Labor: Raking/Grading Gravel	1	2	3	4	5	/	
Fine Grade Rock for Concrete Prep	1	2	3	4	5	/	
Concrete Slabs: Layout & Forming	1	2	3	4	5	/	
Concrete Slabs: Pouring	1	2	3	4	5	/	
Concrete Finishing	1	2	3	4	5	/	
Asphalt Patching	1	2	3	4	5	/	
Welding Work	1	2	3	4	5	/	
Rough Carpentry	1	2	3	4	5	/	
Utility Piping: Water (4" and less)	1	2	3	4	5	/	
Utility Piping: Water (4" and larger)	1	2	3	4	5	/	
Utility Piping: Sewer	1	2	3	4	5	/	
Utilities: Install Manholes & Catch Basin	1	2	3	4	5	/	
Wall Construction: Keystone	1	2	3	4	5	/	
Wall Construction: Ecology Block	1	2	3	4	5	/	
Wall Construction: Redi-Rock	1	2	3	4	5	/	
Wall Construction: Boulders	1	2	3	4	5	/	



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Utility Piping: Storm/Drains	1 2 3 4 5	/	
Utility Piping: Conduit	1 2 3 4 5	/	
Septic System Installation (Gravity)	1 2 3 4 5	/	
Septic System Installation (Pumped)	1 2 3 4 5	/	
Septic System Design	1 2 3 4 5	/	
Driving: Pickup and Trailer	1 2 3 4 5	/	
Truck Driving: Dump Truck	1 2 3 4 5	/	
Truck Driving: Dump Truck & Pup	1 2 3 4 5	/	
Truck Driving: Belly Dump	1 2 3 4 5	/	
Truck Driving: Spreading Rock	1 2 3 4 5	/	
Truck Driving: Grain Doubles	1 2 3 4 5	/	
Truck Maintenance	1 2 3 4 5	/	
Equipment Maintenance	1 2 3 4 5	/	



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I, \_\_\_\_\_, hereby give my permission to release information concerning myself to Palouse River Rock and release the reference giver from all liability associated with this information.

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

Applicants complete above dotted line only

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TO: \_\_\_\_\_ (Company given as reference)

\_\_\_\_\_ has applied for employment with our company and has listed you as a reference. Please answer the following questions and return by mail or fax. Thank You.

Please rate:

	Excellent	Good	Fair	Poor
Performance				
Reliability				
Cooperation				
Quality of Work				
Attitude				

Would you rehire this person?       Yes    No

If "No", please explain:

Other Comments:

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

Title: \_\_\_\_\_





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## SIGNATURE DISCLAIMER

I CERTIFY THAT MY ANSWERS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

By my signature below, I authorize Palouse River Rock or its agent to obtain information -- written, oral, or other -- from a consumer reporting agency bearing on my creditworthiness, credit standing, credit capacity, character, general reputation, personal characteristics, mode of living, criminal background, employment history and driving background (motor vehicle report/MVR). I understand that this investigation may include interviews with friends, acquaintances, or others who may have relevant information and that this report will be used for employment purposes, including evaluating me for employment, promotion, reassignment, or retention as an employee of Palouse River Rock.

I understand that if offered a position with Palouse River Rock, I will be required to submit to a pre-employment medical examination and drug screening. I understand that unsatisfactory result from, refusal to cooperate with, or any attempt to affect the results of these tests will result in withdrawal of any employment offer or termination of employment if already employed. I also authorize medical providers to release the results of my pre-employment physical and drug test and all future employment related physicals and drug tests to Palouse River Rock.

I hereby authorize any and all schools, former employers, references, background-checking agencies, and courts to provide information to Palouse River Rock and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I UNDERSTAND THAT NOTHING SAID OR NO ACTIONS TAKEN DURING THE RECRUITMENT, APPLICATION OR INTERVIEW PROCESS SHALL BE DEEMED TO CONSTITUTE THE TERMS OF AN EXPRESS OR IMPLIED EMPLOYMENT CONTRACT. I UNDERSTAND THAT ANY EMPLOYMENT OFFERED IS FOR AN INDEFINITE DURATION AND AT WILL, AND THAT EITHER PALOUSE RIVER ROCK OR I MAY TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE OR NOTICE.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

Name (please print)	Signature
Date	