

"THE AGGREGATE AUTHORITY"



1850 Tank Farm Rd.  
Pocatello, Idaho 83204  
(208) 237-6550

An Equal Opportunity Employer

**EMPLOYMENT APPLICATION**

Only applicants completing original applications will be considered. This application is current only for thirty (30) days, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary to fill out a new application.

**NOTE: Drivers License check will be completed on all employees.**

The following information is requested to help us make the best possible placement of employees within the company. All portions of this application pertaining to you must be completed. We appreciate the time you spend completing this application. J.K. Merrill, in accordance with state and federal laws, does not discriminate on the basis of age, race, religion, disability, veteran status, sex, age, color, national origin, or any other characteristic protected by law.

NAME (Last)	(First)	(Middle)
ADDRESS (Street)	(City)	(State)
HOME PHONE #	MESSAGE PHONE #	

- If hired, can you show proof of legal authorization to work in the United States? . . . . .  Yes  No
- Are you at least 18 years of age? . . . . .  Yes  No
- If under 18 years of age, can you produce a work permit upon hire? . . . . .  Yes  No
- Are you 21 years of age or older? . . . . .  Yes  No
- If you are hired, when can you begin work? \_\_\_\_\_
- At what locations are you willing and able to work? \_\_\_\_\_
- Please indicate shifts (DAY, NIGHT, SWING) you are NOT willing to work? \_\_\_\_\_
- Are you willing and able to work overtime, holidays, and weekends? . . . . .  Yes  No
- Have you ever been convicted of a felony as an adult? (A conviction will not necessarily disqualify you from employment.)  Yes  No
- If Yes, please explain \_\_\_\_\_
- How were you referred to our company? \_\_\_\_\_
- Have you ever applied to our company before? . . . . .  Yes  No
- If Yes, where and when? \_\_\_\_\_

Education	School	# of years	Degree	Major
High School				
College				
Other				



**Please complete the remainder of this page ONLY if applying for a DRIVING POSITION.**

Driver's License:

State	License Number	Type	Endorsements	Expiration Date

Have you received any Safe Driving Awards? . . . . .  Yes  No

If Yes, from whom? \_\_\_\_\_

Have you been denied a license, permit, or privilege to operate a motor vehicle? . . . . .  Yes  No

If Yes, please explain. \_\_\_\_\_

Has any license, permit, or privilege ever been suspended or revoked? . . . . .  Yes  No

If Yes, please explain. \_\_\_\_\_

Do you possess a current physical examination card as prescribed by the Dept. Of Transportation? . . .  Yes  No

Date of last Dept. of Transportation examination \_\_\_\_\_

**Accident Record For The Past Three Years** (Please attach an additional sheet if more space is needed.)

Date	Nature of Accident (head-on, rear-end, etc...)	Property Damage	Injuries

**Traffic Conviction And Forfeitures For The Past Three Years Other Than Parking Violations**

(Please attach an additional sheet if more space is needed.)

Date.	Location/Description	Charge	Penalty