WAYNE COMPANIES WAYNE GRAVEL PRODUCTS WAYNE CONCRETE

262 Route 44 Shinglehouse, PA 16748 814-697-7191

Employment Application

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, non-job related disability, or any other protected group status.

We are an Equal Opportunity Employer.

Please print legibly in ink. You must complete the entire application and sign the certification on page 5.

Name (first, middle, last)			Today's Date
Address (street, city, state, zip code)			Social Security Number
Primary Phone Number (indicate home or cell)		Secondary Phone Number (indicate home or cell)	
Are you legally authorized to work in the US? If hired, you will be required to provide proof of work auth	Yes norization.	No	
Are you at least 18 years old? If you are not, your employment will be subject to verifica type of work you are applying, and that you have obtained	-		ral minimum age requirements for the
If you have, use the back of this page to explain 1) the nat were convicted. A conviction will not necessarily bar you			
Have you ever been convicted of a felony? If you have, use the back of this page to explain 1) the nat were convicted. A conviction will not necessarily bar you criminal records that have been expunged or sealed. Have you applied for work with this company before?	ure of the	crime, 2) the date of co	
If you have, use the back of this page to explain 1) the nativere convicted. A conviction will not necessarily bar you criminal records that have been expunged or sealed.	ure of the from empl	rime, 2) the date of con oyment. You should no	
If you have, use the back of this page to explain 1) the native were convicted. A conviction will not necessarily bar you for criminal records that have been expunged or sealed. Have you applied for work with this company before? Have you worked for this company before?	ure of the from empl Yes	rime, 2) the date of con oyment. You should no No No	
If you have, use the back of this page to explain 1) the nativere convicted. A conviction will not necessarily bar you criminal records that have been expunged or sealed. Have you applied for work with this company before?	ure of the from empl Yes	No If yes, when	ot disclose any information regarding

EDUCATION				
High School Name	Location (City State)	1 2 3 4	Major Subjects	Type of Diploma or Degree Received
High School Name	Location (City, State)	Years Completed	Major Subjects	Type of Diploma of Degree Received
		1 2 3 4		
College or University Name	Location (City, State)	Years Completed	Major Subjects	Type of Diploma or Degree Received
		1 2 3 4		
Graduate School Name	Location (City, State)	Years Completed	Major Subjects	Type of Diploma or Degree Received
		1 2 3 4		
Other (Specify)	Location (City, State)	Years Completed	Major Subjects	Type of Diploma or Degree Received

TRAINING COURSES				
List any relevant training programs completed.				
Course/Seminar	Sponsoring Organization	Content	Dates Attended	

REQUIRED LICENSE(S)				
If you will be required to drive a motor veh	icle for the job that you are applying, please	provide your:		
Driver's license number	Issuing State			
If you are licensed with any group, association or society relating to the job for which you are applying, please provide the:				
Name	Registration or License Number	State Issued	Expiration Date	
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EMPLOYMENT HISTORY - Start with the mos	t recent; use the back of this page if necess	ary.	
Name of Employer	Pho	ne Number	
Street Address	City	State & Zip	
Job Title	Dates of Employment (F	Dates of Employment (From – To)	
Name of Immediate Supervisor	Starting Salary	Ending Salary	
Description of Duties			
Reason for Leaving If you are currently employed, may we contact t	his employer as a reference? Yes	Νο	
Name of Employer	Pho	ne Number	
Street Address	City	State & Zip	
Job Title	Dates of Employment (F	From – To)	
Name of Immediate Supervisor	Starting Salary	Ending Salary	
Description of Duties			
Reason for Leaving			
Name of Employer	Pho	ne Number	
Street Address	City	State & Zip	
Job Title	Dates of Employment (F	Dates of Employment (From – To)	
Name of Immediate Supervisor	Starting Salary	Ending Salary	
Description of Duties			
Reason for Leaving			

	uals familiar with your job qualifications, other than relatives or personal friends.
Name of Professional Reference	
Daytime Phone Number	Evening Phone Number
Address (City, State, Zip)	
How long known	Relationship
Name of Professional Reference	
Daytime Phone Number	Evening Phone Number
Address (City, State, Zip)	
How long known	Relationship
Name of Professional Reference	
Daytime Phone Number	Evening Phone Number
Address (City, State, Zip)	
How long known	Relationship

Please read carefully before signing this form:

- 1. All Information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired, regardless of when such information is discovered.
- 2. I authorize the company to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any info I have provided and/or for the purpose of obtaining any info, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harm-less any person or organization providing information pertaining to me or my employment.
- 3. I understand that upon receiving a job offer, a physical examination and drug screening may be required.
- 4. I understand that prior to my employment I may be asked to sign a background consent form or other documentation in order to facilitate my hiring. I agree to sign these forms.
- 5. I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.
- 6. This company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability or any other protected status under applicable federal, state or local laws. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate or non-employee (such as a vendor or customer). This company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.
- 7. Regardless of whether or not I become employed by the company, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at this company is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the company's, unless specifically provided otherwise in a written employment contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the company, and then only by means of a signed, written document.

Signature of Applicant

Date

Thank you for your interest in our company.