

Beginning with your most recent employment, list all present and past employers.

Name of Present or Last Employer _____
Name of Company

Telephone _____ Type of Business _____

Address _____
Street and Number City State Zip

Name of Supervisor _____

May we contact this person? YES ___ NO ___ Starting Date _____ Last Day Worked _____

Reason for Leaving _____

Describe your work _____

Name of Present or Last Employer _____
Name of Company

Telephone _____ Type of Business _____

Address _____
Street and Number City State Zip

Name of Supervisor _____

May we contact this person? YES ___ NO ___ Starting Date _____ Last Day Worked _____

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Name of Present or Last Employer _____
Name of Company

Telephone _____ Type of Business _____

Address _____
Street and Number City State Zip

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May we contact this person? YES ___ NO ___ Starting Date _____ Last Day Worked _____

Reason for Leaving _____

Describe your work _____

HANSEN BROS. ENTERPRISES

CSL 207705

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Telephone (530) 273-3381 ♦ Fax (530) 272-5401
AN EQUAL OPPORTUNITY EMPLOYER

EMPLOYMENT APPLICATION

APPLICANTS MAY REQUEST ANY NEEDED ACCOMMODATION
TO PARTICIPATE IN THE APPLICATION/INTERVIEW PROCESS

Name _____ Date _____
Last First Middle

Telephone No. () _____ Date Available _____

Address _____
No. Street City State Zip

Position applied for _____

Have you filed an application with us before? Yes ___ No ___
If yes, when? _____

Have you been previously employed by us? Yes ___ No ___
If yes, when? _____

Are you presently employed? Yes ___ No ___
If yes, may we contact your present employer? Yes ___ No ___

Are you on a lay-off and subject to recall? Yes ___ No ___

Are you applying for: Regular full-time work? Yes ___ No ___
Regular part-time work? Yes ___ No ___

If needed, would you be available to:
Work overtime? Yes ___ No ___
Work irregular hours? Yes ___ No ___

If no to any of the above, please explain _____

If employed and you are under age 18, can you furnish a work permit? Yes ___ No ___

**IN COMPLIANCE WITH FEDERAL LAW, ALL PERSONS HIRED WILL BE REQUIRED TO VERIFY
IDENTITY AND ELIGIBILITY TO WORK IN THE UNITED STATES, AND TO COMPLETE THE
REQUIRED EMPLOYMENT ELIGIBILITY VERIFICATION FORM UPON HIRE.**

NOTICE TO APPLICANTS

If a conditional offer of employment is made, a pre-employment drug screen will be required. A pre-employment/post-offer physical examination for the applicable position(s) will be performed. If applying for a job that requires driving a company (HBE) owned vehicle and you receive a contingent offer of employment, regardless of class of license, you will be required to release your driving record information. Employment in a position that requires driving is contingent upon a clean driving record for the most recent 5 years.

EDUCATION/SKILLS/TRAINING

List any education, special skills or training you have acquired which you feel make you especially suited to the position for which you are applying: _____

REFERENCES

List below the name, address and telephone numbers of two (2) professional references who can provide information about your job history and abilities: _____

Computer and office skills (complete regardless of the position applied for). Please provide resume to better describe your experience.

Clerical _____ Administrative _____ Management _____ Customer Service _____ Receptionist _____

Bookkeeping: Accounts Payable _____ Accounts Receivable _____ Type _____ wpm

Computer Operation/Programming: _____

Type of System(s)

List any software programs in which you have experience:

AGREEMENT

PLEASE READ CAREFULLY, INITIAL EACH PARAGRAPH AND SIGN BELOW

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without requiring additional authorization or giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative (**Employment Is At Will**).

_____ This application for employment shall be considered active for a period of time not to exceed thirty (30) days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. An updated application will be required.

SIGNATURE OF APPLICANT

DATE

PLEASE CONTINUE ONTO THE EMPLOYMENT RECORD ON THE REVERSE

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EMPLOYMENT RECORD

MECHANIC SHOP

IF YOU ARE APPLYING FOR A POSITION IN THE MECHANIC SHOP, PLEASE INDICATE YOUR YEARS OF EXPERIENCE FOR THE FOLLOWING:

ENGINES John Deere _____ Cummins _____ Paccar _____ Cat _____
 Other _____
 Type / Years Experience Type / Years Experience

TRANSMISSIONS Allison _____ Eaton _____ Clark _____ Cat _____
 Fuller _____ Other _____
 Type / Years Experience

HYDRAULICS John Deere _____ Sunstrand _____ Vickers _____ Cat _____
 Other _____
 Type / Years Experience Type / Years Experience

ELECTRICAL 12V _____ 24V _____ Other _____

WELDING Mig _____ Tig _____ Stick _____

SMOG EQUIPMENT REPAIR _____ License Number _____

TIRE SHOP Trucks _____ Auto _____ Equipment _____

Please list below the type(s) of equipment you are experienced in:

ANY POSITION IN THE MECHANIC SHOP REQUIRES THE COMPLETION OF THE DRIVERS' LICENSE HISTORY ON THE REVERSE AS WELL AS THE SUBMISSION OF A CURRENT DMV REPORT, CONTINGENT ON AN OFFER OF EMPLOYMENT.

NOTICE TO APPLICANTS

If a conditional offer of employment is made, a pre-employment drug screen will be required. A pre-employment/post-offer physical examination for the applicable position(s) will be performed. If applying for a job that requires driving a company (HBE) owned vehicle and you receive a contingent offer of employment, regardless of class of license, you will be required to release your driving record information. Employment in a position that requires driving is contingent upon a clean driving record for the most recent 5 years.

CONSTRUCTION APPLICANTS

FOREMAN/ESTIMATOR/EQUIPMENT OPERATORS

<u># YRS EXPERIENCE</u>	<u># YRS EXPERIENCE</u>	<u># YRS EXPERIENCE</u>
_____ Crusher, Gravel Plant	_____ Backhoe	_____ Paver
_____ Dozer	_____ Excavator	_____ Screed
_____ Loader	_____ Skiploader/Tractor	_____ Finish AC Roller
_____ Scraper	_____ Gradesetter	_____ Foreman
_____ Compactor	_____ Grader	_____ Estimator
_____ Directional Drill	_____ Forklift	_____ Other

DRIVERS

<u># YRS EXPERIENCE</u>	<u># YRS EXPERIENCE</u>	<u># YRS EXPERIENCE</u>
_____ 6 Yard Dump	_____ Truck & Pup	_____ Water Truck
_____ 10 Yard Dump	_____ Transfer	_____ Ready Mix
_____ Semi Bottom Dump	_____ Low Bed	_____ Other
_____ Semi End Dump	_____ Flat Bed	_____ Other

LABORERS

<u># YRS EXPERIENCE</u>	<u># YRS EXPERIENCE</u>	<u># YRS EXPERIENCE</u>
_____ Chainsaw	Pipe Layer Type & Size of Pipe	Other
_____ Flag Person	_____	_____
_____ Jack Hammer	_____	_____
_____ Raker, Asphalt	_____	_____
_____ Wacker	_____	_____
_____ Concrete Finisher	_____	_____

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APPLICANT DRIVER'S LICENSE HISTORY

(MUST BE COMPLETED BY ALL APPLICANTS EXCLUDING CLERICAL/OFFICE POSITIONS)

- 1. Do you possess a current valid driver's license? Yes_____ No _____
If yes, in what state _____ License No. _____ Expiration Date _____
- 2. What class of license do you hold? _____
- 3. Do you have a current medical card? Yes_____ No _____
If yes, expiration date of card _____
- 4. What special training have you had? _____

- 5. Has your license ever been revoked? Yes_____ No _____
If yes, for what reason? And when? _____

- 6. Have you had any moving traffic violations in the past three (3) years? Yes_____ No _____
If yes, please explain _____
- 7. Have you had any accidents within the past five (5) years? Yes_____ No _____
If yes, please explain _____
- 8. Have you had any accidents on the job? Yes_____ No _____
If yes, please describe the circumstances _____

APPLICATION REVISED MARCH 26, 2018

IF YOU ARE APPLYING FOR A DRIVERS' POSITION, YOU MUST ALSO COMPLETE THE DRIVERS SECTION OF THE CONSTRUCTION APPLICANT INFORMATION (PREVIOUS PAGE).

AGREEMENT

I agree to submit a current DMV report of my driving record to be considered along with this application, contingent upon an offer of employment

If I am employed by Hansen Bros., upon request at any time throughout my employment, I agree to submit a DMV report or authorize Hansen Bros. to investigate my driving record.

Signature of Applicant

Date