

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

Pentagon Materials, Inc. is an equal employment opportunity employer and does not discriminate on the basis of sex, age, race, color, religion, national origin, mental or physical disability, marital or veteran status or any other legally protected status. Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application blank. PLEASE PRINT, except for signature on back of Application. All information given will be available only to persons who have a "need to know" or as required by law. *Pentagon Materials, Inc.* will make reasonable accommodations in the application process, if needed.

Pentagon Materials, Inc.
3301 Third Avenue
Mankato, MN 56001
Phone: 952-463-6590
Fax Number: 507-389-9703



Today's Date: _____

Name (Print): _____
Last First Middle

Address: _____
Street

City State Zip

Phone: Home: _____

Other: _____

Position Desired: _____

Salary Desired: _____

When are you available for employment? Date: _____

Seeking: Full-Time Part-Time Temporary

Emergency Contact _____

Contact Phone _____ Relation _____

Have you ever been employed by either company? No Yes - if so when? _____

Can you furnish proof that you are legally eligible for employment in the United States? Yes No

Are you at least 18 years old? Yes No

Do you have a valid driver's license? No Yes - what type: Operator's (Private Vehicle)

CDL (copy of license, medical card, and driver history needed) HAZMAT Endorsement Yes No

Driver's license number: _____ State/Exp: _____

Do you have any relatives or friends working at either company? No Yes - please list: _____

How did you hear about this job? _____

EMPLOYMENT HISTORY *(Most recent first)*

1. Job Title:		Equipment Operated/Duties:			
Employer:					
Dates of Employment (month/year)					
From:	To:				
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp			
Employer's Address:					
Supervisor:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		Phone:	
Reason for Leaving:					
2. Job Title:		Equipment Operated/Duties:			
Employer:					
Dates of Employment (month/year)					
From:	To:				
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp			
Employer's Address:					
Supervisor:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		Phone:	
Reason for Leaving:					
3. Job Title:		Equipment Operated/Duties:			
Employer:					
Dates of Employment (month/year)					
From:	To:				
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp			
Employer's Address:					
Supervisor:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		Phone:	
Reason for Leaving:					

EDUCATION

TYPE OF SCHOOL	NAME AND LOCATION	DATES ATTENDED	DEGREE RECEIVED	SUBJECTS STUDIED	DID YOU GRADUATE?
High School					
College / University					
Graduate School					
Tech School					
Other					

Special courses, training or experience acquired, including military experience: _____

SKILLS/EQUIPMENT OPERATED

Maintenance Skills		
Computer Skills	Name of software:	<input type="checkbox"/> PC <input type="checkbox"/> MAC <input type="checkbox"/> WPM
Languages		
Other Special Knowledge or Skills		

MSHA Training? Yes No OSHA Training? Yes No

EQUIPMENT DESCRIPTION	MODEL # / SIZE	6 MONTHS	1 YEAR	2 YEARS	3 YEARS	4 YEARS	5 OR MORE
Road Broom Sweeper							
Rollers / Packers							
Water Truck / Water Wagon							
Front-End Loader							
Farm Tractors							
Articulating Tractors							
Articulating Tractor w/ Scraper Units							
Smoothing Scraper Operation							
Articulating Haul Trucks (Off-Road)							
Tandem Axle Dump Trucks (CDL)							
Tractor Trailer Trucks (CDL)							
Lube/Service Truck							
Heavy Equipment Hauling (CDL)							
Bull Dozer Operation (Clearing, etc.)							
Bull Dozer (Finish Grade)							
Back-hoe							
Track-hoe (track and rubber tired) Excavator							
Motor-Grader Operation							
Motor Grader (Finish Grade)							
GPS Operation on Dozers, Motor Graders, Excavators, Tractors, etc.							
Fork Lift							
Rock Crusher/Screens:							
Other:							
Other:							
Other:							
Other:							

Please describe any other experience, abilities or skills that might be helpful in considering your application: _____

PLEASE READ AND SIGN THE BACK OF THIS APPLICATION BEFORE SUBMITTING.

Please list 3 references, not relatives or former employers.

REFERENCES		
NAME	ADDRESS	PHONE

CERTIFICATION & AUTHORIZATION

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand that any misrepresentations or omissions of facts in this application (whether intentional or un-intentional) are grounds for disqualification from further consideration or, if hired, immediate termination.

I authorize *Pentagon Materials, Inc.* to check all references from current and previous employers and any person listed as a reference on this application that may be relevant to my employment or my ability to perform the job for which I applied. I authorize *Pentagon Materials, Inc.* to verify any of the information furnished in this application including, but not limited to, criminal history and driving records. I authorize all persons, schools, companies and law enforcement authorities to release any information concerning my background that may be relevant to evaluation of this application and I hereby release any such persons, schools, companies and law enforcement authorities from any liability or damages whatsoever for issuing this information to *Pentagon Materials, Inc.* and/or its agents.

If employed, I agree to conform to the rules, regulations and policies of the company. I understand that I will be an employee "at-will" and either *Pentagon Materials, Inc.* or I may terminate my employment relationship at any time for any reason not in violation of law. At no time shall any oral statement by the management of *Pentagon Materials, Inc.* be construed as giving rise to or creating a contract of employment between *Pentagon Materials, Inc.*, and me or any other employee, or otherwise alter or modify the "at-will" nature of the employment relationship.

I understand that *Pentagon Materials, Inc.* prohibits the use and possession of controlled substances and/or alcohol on its premises. As required by the company's policies, I am willing to submit to drug and alcohol testing to detect the use of illegal drugs or alcohol prior to and during employment.

I hereby acknowledge that I have read and fully understand the forgoing and seek employment under these conditions.

Signature of Applicant

Date

OFFICE USE ONLY

Date of Review: _____

Reviewed by: _____ Title: _____

Accepted Rejected Deferred