L. R. FALK CONSTRUCTION COMPANY 141 W. 4th St., PO Box 189 St. Ansgar, IA 50472

Phone (641)713-4569 Fax (641)713-3200

EMPLOYMENT APPLICATION AGREEMENT

I authorize investigation of all job related information contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

date of payment of my wag	es and salary, be terminated at	any time without any previous notice.
Print First Name	Middle Name	Last Name
Date:	Applicant Signature:	
PRE-E	MPLOYMENT DRUG & ALC NOTIFICATION AND CO	
and company policy, all proceed collection of a urine sammarijuana, cocaine, opiates will be placed on the employee.	ospective drivers must submit to apple that will be tested for s, amphetamines and phencycloyee alcohol random testing pro- name be selected. This test wi	er Safety Regulations 49 CFR Part 382 of a controlled substances test involving the following controlled substances: idine (PCP). I also understand that I ogram and will be required to submit to ll be completed while the employee is
qualified to operate a comr	nercial motor vehicle. I also u the company's medical review	ostances or alcohol, I am not medically inderstand I will be given a reasonable v officer before any positive drug test
who will report to the comp	oany whether the test results we	nedical review officer of the company, ere negative or positive. The results of ept as provided in s 40.37, without my
I here	eby agree to submit to urine &	alcohol drug tests.
Print Applicant's Name:		
Applicant's Signature:		
Date:		

L. R. FALK CONSTRUCTION COMPANY IS AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL DATA

Please print. Answer all question and use the words "no or "none" when necessary. All information will be kept confidential. Name: ______ Telephone No.: (____)____ Present Home Address: Email Address:____ Can you legally work in the United States? _____ yes ____ no Type of position desired: Who referred you to our company? List of friends or relatives employed by our company: Have you been employed by L. R. Falk before? _____ Have you applied to L. R. Falk before? _____ Date available for employment: _____ List any special skills or equipment you operate: If applying for a driving position, please answer the following: What type driver's license do you have? ____ Operator State: _____ _____ CDL – classification _____ License No. In case of emergency, Notify: Name: _____ Address: _____ Phone No. _____

EMPLOYMENT BACKGROUND

Indicate present or last employer first.

Employer:		Telephone No:
Address:		
Start Date:	End Date:	Yearly base salary:
Supervisor's Name &	Title:	
Describe beginning an	d final title and duties: _	
Employer:		Telephone No:
Address:		
Start Date:	End Date:	Yearly base salary:
Supervisor's Name &	Title:	
Describe beginning an	d final title and duties: _	
Employer:		Telephone No:
Address:		
		Yearly base salary:
Supervisor's Name &	Title:	
Describe beginning an	d final title and duties: _	
Desired salary range:		May we contact your present employer?
From: \$	To: \$	yes no
		– U.S. ARMED FORCES
Branch:		
		ation:
	Inactive	
	Other – Explain:	·

EDUCATION

High School:	
Name & Location:	
Major/Field of Study:	
Degree/Diploma:	
Colleges:	
Name & Location:	
Major/Field of Study:	
Degree/Diploma:	
Others:	
Name & Location:	
Major/Field of Study:	
Degree/Diploma:	
In accordance with applicable state and Construction Company to obtain a copy of driver's license history will be reviewed by	TAIN DRIVERS LICENSE HISTORY federal laws, I do hereby authorize L. R. Falk of my driver's license history. I understand that my y L. R. Falk Construction Company for employment a continuing authorization and, if hired, the company y employment.
Applicant's Signature	Drivers License Number
Date	State Issued