

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: _____ SIGNATURE: _____

**PRE-EMPLOYMENT DRUG & ALCOHOL TESTING
NOTIFICATION AND CONSENT**

I understand that, as required by the Federal Motor Carrier Safety Regulations 49 CFR Part 382 and company policy, all prospective drivers must submit to a controlled substances test involving collection of a urine sample that will be tested for the following controlled substances: marijuana, cocaine, opiates, amphetamines and phencyclidine (PCP). I also understand that I will be placed on the employee alcohol random testing program and will be required to submit to an alcohol test should my name be selected. This test will be completed while the employee is currently working on the job.

I understand that, if I test positive for use of controlled substances or alcohol, I am not medically qualified to operate a commercial motor vehicle. I also understand I will be given a reasonable opportunity to confer with the company's medical review officer before any positive drug test result is reported to the company.

The results of the drug tests will be maintained by the medical review officer of the company, who will report to the company whether the test results were negative or positive. The results of any tests will not be released to any additional parties, except as provided in s 40.37, without my written authorization.

I hereby agree to submit to urine & alcohol drug tests.

Print Applicant's Name: _____

Applicant's Signature: _____

Date: _____

**L. R. FALK CONSTRUCTION COMPANY IS AN
EQUAL EMPLOYMENT 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: _____ Social Security Number: _____

Present Home Address: _____ Telephone No.: (____) _____

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: _____ Address: _____
Telephone No: _____
Length of service: _____
Yearly base salary: _____ Supervisor's Name & Title: _____
Describe beginning and final title and duties: _____

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Length of service: _____
Yearly base salary: _____ Supervisor's Name & Title: _____
Describe beginning and final title and duties: _____

Desired salary range: _____ May we contact your present employer?
From: \$ _____ To: \$ _____ _____ yes _____ no

MILITARY SERVICE – U.S. ARMED FORCES

Branch: _____

Reserve Status: _____ Active - Obligation: _____
_____ 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: _____

List extracurricular activities and/or offices held:

High School: _____
College: _____

AUTHORIZATION TO OBTAIN DRIVERS LICENSE HISTORY

In accordance with applicable state and federal laws, I do hereby authorize L. R. Falk Construction Company to obtain a copy of my driver's license history. I understand that my driver's license history will be reviewed by L. R. Falk Construction Company for employment purposes. I further understand that this is a continuing authorization and, if hired, the company can review my record at any time during my employment.

Applicant's Signature

Drivers License Number

Date

State Issued