

# Rule Construction, Ltd.

## Application For Employment

We are an Equal Opportunity Employer and are committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

### Personal Information

Name

Address		City	State	Zip
Phone Number	Mobile Number	Email Address		
Are You A U.S. Citizen?		Have You Ever Been Convicted Of A Felony?		
Yes	No	Yes	No	
If Selected For Employment Are You Willing To Submit to a Pre-Employment Drug Screening Test?				
Yes		No		

### Position

Position You Are Applying For	Available Start Date	Desired Pay		
Employment Desired				
Laborer	Operator	Quarry	CDL Truck Driver	Mechanic

### Education

School Name	Location	Years Attended	Degree Received	Major

### References

Name and Relationship	Title	Company	Phone

## Employment History

<b>Employer (1)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (2)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (3)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (4)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (5)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip

## Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.  
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name (Please Print)	Signature
Date	

## Request for Information from Previous Employers

**Rule Construction, Ltd.**  
**3696 State Road 23, Dodgeville, WI 53533**  
**Office (608) 935-2701 Fax (608) 935-2383 RuleLtd@frontier.com**

Name (Please Print)

Address

Date

Signature

**I authorize Rule Construction, Ltd to contact the employers I have provided, for possible job opportunities.**

# IF you are applying for a CDL Position

**Please be sure you are registered on the FMCSA Clearinghouse site before you apply.  
By law, we are required to do a full query before hiring anyone for a CDL position.**

## License Information

License Number	Endorsements	Expiration
Current Federal Medical Card Yes                      No	Are you registered with the FMCSA Drug and Alcohol Clearinghouse? Yes                      No	Date of birth:

## Violation History

I certify that the following is a true and complete list of traffic violations for which I have been convicted or forfeited bond or collateral during the past 3 years including any pending cases (other than parking violations).

Offence	Location	Type of Vehicle	Date

## Violation Judgements

I certify that the following is a true and complete list denials, revocations or suspensions of any license, permit or privilege to operate a motor vehicle issued to me during the past 3 years. Include facts and circumstances.

Denial, Revocation or Suspension	Date	Simple statement detailing the facts

## Experience

What type of trucks or models of construction equipment can you operate.

	Years
	Years
	Years
	Years
	Years

Please fill out the authorization form to allow us to check your driving record. We will only do this if you are being seriously considered for a position. We will not use this information for any other reason.



## AUTHORIZATION FOR RELEASE OF INFORMATION FOR EMPLOYMENT PURPOSES

### Background Screening Disclosure

I hereby authorize Corra and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for employment, promotion, reassignment or retention as an employee. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: names and dates of previous/current employment, work experience, worker's compensation claims, criminal history records (from local, state, federal, international and other law enforcement agencies' records), sexual offender's lists, wants and warrants records, motor vehicle records, military records, educational verification, license verification, credit history, civil cases, OIG/GSA, OFAC/patriots act, any sanction lists, FBI finger printing and drug testing. Upon Request, Corra, 13011 W. Washington Blvd., 2<sup>nd</sup> Floor, Los Angeles, CA 90066 will supply a copy of the completed consumer report along with a copy of an individual's rights under the Fair Credit Reporting Act.

### Authorization and Release

I, \_\_\_\_\_, authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation, or public agency may have. I authorize the full release of the information described above, without any reservation, throughout any duration of my employment at \_\_\_\_\_ (company name). I hereby release Corra and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at any time, result to me, my heirs, family or associates because of compliance with this authorization and request to relapse. I certify that all information provided below and on my resume is correct to the best of my knowledge. Any false statements provided in this form and my resume will be considered just cause for the termination of employment at any time. This authorization and consent shall be valid in original, fax, or copy form.

The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose.

\_\_\_\_\_  
Applicant's Name (Print Legibly)

\_\_\_\_\_  
Maiden/AKA/Previous Name(s)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth (MM/DD/YYYY) (This will not affect hiring decision)

\_\_\_\_\_  
Driver License Number

\_\_\_\_\_  
State

\_\_\_\_\_  
Current Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP/Postal Code

(\_\_\_\_\_) \_\_\_\_\_  
Phone