



APPLICATION FOR EMPLOYMENT

4055 W. Jackson Street, Macomb, IL 61455
Phone: (309) 837-1258 Fax: (309) 833-4993

Laverdiere Construction, Inc., is an equal opportunity employer and is always accepting applications to increase our workforce. We do not discriminate against otherwise qualified applicants on the basis of race, color, religion, sex, sexual orientation, gender identity, genetic information, pregnancy status, marital status, order of protection status, national origin or ancestry, citizenship status, age, physical or mental disability unrelated to ability, military status or an unfavorable discharge from military service, or any retaliation for filing any discrimination charges. We strongly encourage applications from women and minorities for all positions within our company.

PERSONAL INFORMATION

Name: _____
First Middle Last

Address: _____
Street City State Zip Code

Telephone Number: () _____ E-Mail: _____

Are you legally authorized to work in the United States? Yes No

Are you 18 years of age or older? Yes No

Do you have a valid driver's license? Yes No

Do you have a Commercial Driver's License? Yes No

Do you have a current CDL Medical Card? Yes No

Driver's License #: _____ State of Issue: _____ Expiration Date: _____

Are you insurable on our company vehicle policy, if the position requires any driving? Yes No

Have you ever been dismissed or forced to resign from any employment? Yes No

If yes, please identify employer's name and relevant dates: _____

POSITION INFORMATION

Area of Interest: Laverdiere Construction Commercial Rental Other

Position applied for: _____

Type of Employment: Full-Time Part-Time Temporary, Seasonal, or Summer

If Part-Time, Temporary, Seasonal, or Summer, number of desired hours per week: _____

If requested, are you willing to work any of the following:

Weekends Holidays Nights Overtime

Date Available to Work: _____

Are you able to perform the duties of the job you are applying for? Yes No

EDUCATION

Level of Education	Name of School	Location	Diploma Yes/No	Major or Course of Study
High School				
Technical / Business School				
College / University				
Graduate School				
Other				

SKILLS AND ABILITIES

Please list any specialized training certificates, job skills, or equipment operated that are pertinent to the position you are applying for:

POSITION SPECIFIC SKILLS

❖ Complete only if applicable

Welder:

Years of Experience in each category

General Welding: _____

Steel Fabrication: _____

Other: _____ Explain: _____

Mechanic:

Years of Experience in each category

General Mechanic: _____

Agriculture Equipment: _____

Construction Equipment: _____

Small Engine Repairs: _____

Small Hand Tool Repairs: _____

Car & Pickup Truck Repairs: _____

1-2 Ton Truck Repairs: _____

Diesel Repairs: _____

Dump Truck Repairs: _____

Hydraulic System Repairs: _____

Electrical Diagnostic Systems & Repairs: _____

Transporting Equipment: _____

Welding: _____

Steel Fabrication: _____

Estimating Repair Costs: _____

Computer System Diagnostics & Repairs: _____

Other: _____ Explain: _____

Truck Driver:

Years of Experience Driving the Following Equipment

Tandem Dump Truck: _____

Semi with Dump Trailer: _____

Semi with Lowboy Trailer: _____

Ready-Mix Cement Truck: _____

EMPLOYMENT HISTORY

In the following spaces, provide a record of your employment history, or attach your resume. Begin with your current employment and work back through the last three companies with which you were employed.

_____	From: _____ To: _____
Place of Employment	Dates of Employment
_____	_____
Address	Phone
_____	_____
City, State, Zip Code	Immediate Supervisor
_____	_____
Position and Duties	

Reason for Leaving	

_____	From: _____ To: _____
Place of Employment	Dates of Employment
_____	_____
Address	Phone
_____	_____
City, State, Zip Code	Immediate Supervisor
_____	_____
Position and Duties	

Reason for Leaving	

_____	From: _____ To: _____
Place of Employment	Dates of Employment
_____	_____
Address	Phone
_____	_____
City, State, Zip Code	Immediate Supervisor
_____	_____
Position and Duties	

Reason for Leaving	

REFERENCES

Please list 3 references that know you either professionally or personally that are not already listed in employment history. Please do not list family members.

Name	Phone
Address	
Relationship	
Email Address	Number of Years Known

Name	Phone
Address	
Relationship	
Email Address	Number of Years Known

Name	Phone
Address	
Relationship	
Email Address	Number of Years Known

REFERRAL SOURCE

How did you hear about our company? Advertisement: _____ Company Website
 Referred by: _____ Other: _____

Do you know any current or former employees with Laverdiere Construction, Commercial Rental, or LCI Concrete? Yes No If so, please list below:

Have you previously worked for our company or any of our affiliates? Yes No



EMPLOYMENT INQUIRY RELEASE

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In consideration for employment or promotion with Laverdiere Construction, Inc., we may, on our behalf, make inquiries including, but not limited to, your consumer credit history, education, professional licensing, driving history, your personal character, abilities, work habits, mode of living, residency, immigration status, general reputation, performance, experience, and other qualities pertinent to your qualifications for employment including reasons for termination of past employment.

In compliance with the Americans with Disabilities Act, only after a contingent offer of employment, will your worker's compensation history be investigated for the purpose of making certain that you are not hired for a position or assigned a job function that could aggravate a previous injury.

In compliance with the Fair Credit Reporting Act, you are entitled to be informed if an offer of employment is withheld because of information obtained. In that event, we will provide a copy of the report we receive and the FTC notice, "A summary of your rights under the Fair Credit Reporting Act".

Please complete the information below and sign the form authorizing, without reservation, any party including, but not limited to, employers, state agencies, institutions and private information bureaus or repositories, contacted by us the above-mentioned information as requested, in order to successfully complete a background investigation. Your signature allows a photocopy or fax copy of this authorization to be as valid as the original.

You will be given a copy of this completed notice verifying that a consumer report may be obtained for employment purposes. Please retain it for your records.

Please complete the following information. Print legibly.

PRINT FULL NAME	_____
SOCIAL SECURITY NUMBER	_____ DATE OF BIRTH (Optional)* _____
STREET ADDRESS	_____
CITY, STATE, ZIP CODE	_____
DRIVER'S LICENSE NUMBER	_____ STATE _____
APPLICANT SIGNATURE	_____ DATE _____

**Date of birth is being requested only for the purposes of identification in obtaining accurate retrieval of records and it will not be used for discriminatory purposes.*

EMPLOYMENT APPLICATION ACKNOWLEDGEMENT

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that employment is contingent upon the background inquiry. Incomplete, false, or misleading statements shall prevent my application from receiving further consideration, and, if discovered after I am employed, shall be considered sufficient cause for dismissal.

I will comply with the Company's Substance Abuse Program by submitting to drug and alcohol testing both at pre-employment and at random notice. I acknowledge that a positive drug/alcohol test result is sufficient reason for refusal to hire or to terminate employment. Further, I release this Company, including its agents, employees, representatives, and attorneys from all liability in connection with the drug/alcohol testing.

I also understand that, if employed, I may be placed on probationary status initially; employment is "at will" for no definite period of time; my position may be terminated at any time without notice; the Company has rules, regulations, policies and procedures that I will be expected to follow; salary and benefits will conform to the Company's standards; and terms of employment can only be modified by the Company President or his designee.

Date: _____

Applicant's Signature: _____

Please return completed applications to:

Laverdiere Construction, Inc.
4055 W. Jackson Street
Macomb, IL 61455

E-Mail: jmiller@lavconinc.com