

3 Bull Contracting LLC is an qual opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below: **Applicant Information Applicant Name:** Address: City, State and Zip Code: **Telephone Number:** Email Address: Date of Application: **Employment Position** Position(s) applying for: Laborer/Equipment Operator/CDL Drive (full time) How did you hear about this position? On what date can you start working if you are hired? Do you have reliable transportation to and from work? **Personal Information** Have you ever applied to or worked for 3 Bull Contracting LLC before? Yes No If yes, when? Do you have any friends, relatives, or acquaintances working for 3 Bull Contracting LLC No If yes, state name & relationship: Are you 18 years of age or older? Yes No Are you a U.S. citizen or approved to work in the United States? Yes No What document can you provide as proof of citizenship or legal status?

Yes

No

Will you consent to a mandatory controlled substance test?

Do you have any condition which would require job accommodations?				No
If yes, please describe accommodations required below.				
Have you ever been convicted of a criminal offense (felony or misdemeanor)?				
If yes, please state the na	ature of the crime(s), when and	where convicted and	disposition of the c	ase:
The date of the offense, description of the event, a	denied employment solely on the nature of the offense, in and the surrounding circumst r, however, be considered.)	ncluding any significa	nt details that affe	ect the
Job Skills/Qualification Please list below the skills	<u>s</u> and qualifications you possess	s for the position for wl	nich you are applyii	ng:
measures that may be necessible that a hire may be conducted by a medical pr	·	employees to perform e	essential functions.	It is
Education and Training	I			
Name Name	Location (City, State)	Year Graduated	Degree Earne	ed
College/University			I	
Name	Location (City, State)	Year Graduated	Degree Earne	ed
Vocational School/Speci	alized Training	L -		
Name	Location (City, State)	Year Graduated	Degree Earne	ed
Military:  Are you a member of the				
What branch of the military ra	nk when discharged?			
How many years did you	serve in the military?			

<u>revious Employment</u>	
Employer Name:	
Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
Employer Name:	
Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
Employer Name:	
Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
e <u>ferences</u> lease provide 3 personal and prof	fessional reference(s) below:
Reference	Contact Information
	drugs or alcohol when randomly selected for a drug test with a
previous employer?	

## AT-WILL EMPLOYMENT

The relationship between you and the 3 Bull Contracting LLC is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or the 3 Bull Contracting LLC. No representative of 3 Bull Contracting LLC has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will," and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either our Executive Vice-President/Chief Operations Officer or the Company's President.

Applicant Signature:		Dated:	
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