



# APPLICATION FOR EMPLOYMENT®

Mealy Excavating & Construction, Inc.  
 128 lake Lucy Road Tionesta, PA 16353  
 Phone: 814-354-2311  
[www.mealyinc.com](http://www.mealyinc.com)

rev 05/20

We are an equal opportunity employer. In compliance with Federal and State employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, gender, national origin, marital status, veteran status or the presence of a disability which, with or without a reasonable accommodation, would not prevent an applicant from performing all of the essential functions of the relevant job(s). We participate in the US Department of Homeland Security's "E-Verify" program to verify employment illegibility.

**INSTRUCTIONS: Read Carefully before proceeding.**

- Resumes will not be accepted in-lue of this application. You may attached your resume to this fully completed form.
- Please type or print the entire application form. Incomplete or illegible applications will not be processed.
- Apply for one person per application.
- Give complete information on your education and work history ("*See resume*" is not acceptable).
- Please do not provide any information that is not requested.
- Sign and date your application. E-mailed applications will require a digital signature.
- **Be sure to fill out all four pages of this application form in it's entirety.**
- This form can be e-mailed to HR@mealyinc.com, mailed or hand delivered to the above address.

Position Applied For:		Today's Date:	
Check the type of position you are seeking:			
<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<input type="checkbox"/> Temporary	<input type="checkbox"/> Shift Work
Date Available:	<input type="checkbox"/> Yes		
Are you subject to recall from a current lay-off? <input type="checkbox"/> No			
Can you travel if the job requires it?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

Last Name:	First Name:	Middle Initial:
Address:		
City:	State:	Zip Code:
Cell / Daytime Phone #:	E-Mail:	Home Phone #:

If you are under 18 years of age, can you provide a work permit?	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been employed with us before? If yes, give dates:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you Currently employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
May we contact your present employer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you limited to how much you can make? (i.e. Social Security, etc.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you prevented from lawfully becoming employed in this country due to VISA or immigration status?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>Verification will be required once decision to hire has been made.</i>			

Current Employer:		Position Held:	
Street Address:		City	State Zip Code
Start Date:	End Date:	Hourly Rate:	Reason for Leaving:
Supervisor's Name:		Phone:	

<b>Previous Employer #1:</b>			Position Held:	
Street Address:		City	State	Zip Code
Start Date:	End Date:	Hourly Rate:	Reason for Leaving:	
Supervisor's Name:			Phone:	

<b>Previous Employer #2:</b>			Position Held:	
Street Address:		City	State	Zip Code
Start Date:	End Date:	Hourly Rate:	Reason for Leaving:	
Supervisor's Name:			Phone:	

<b>Previous Employer #3:</b>			Position Held:	
Street Address:		City	State	Zip Code
Start Date:	End Date:	Hourly Rate:	Reason for Leaving:	
Supervisor's Name:			Phone:	

<b>Previous Employer #4:</b>			Position Held:	
Street Address:		City	State	Zip Code
Start Date:	End Date:	Hourly Rate:	Reason for Leaving:	
Supervisor's Name:			Phone:	

<b>High School:</b> Indicate highest grade completed (1-12):				
Name:	City & State:	Received: <input type="checkbox"/> Diploma <input type="checkbox"/> None <input type="checkbox"/> GED		
<b>College, University, Vocational, Technical, Business School:</b>				
Name of School:	City & State:	Course of Study:	Degree / Diploma	

<b>References:</b> List names, address and telephone numbers of three references who are <b>not</b> related to you and are <b>not</b> previous employers.		
Name:	City & State:	Phone #:

**DOT Certified:** Required by the U.S. Department of Transportation

Last Name:	First Name:	Middle Initial:
Social Security Number:	Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, what is the issuing state?		
Do you have a current DOT Medical Examiner's Certificate (aka Medical Card)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been denied a license, permit or privilege to operate a motor vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Has any license, permit, or privilege ever been suspended or revoked to operate a motor vehicle in the past 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have more than one driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you answered yes to either question in the box above, please provide a statement giving details.		

**List all addresses of residence for the past three years:**

Street Address:	City:	State:	Zip:	Years:

**List all unexpired driver's licenses / permit numbers with expiration dates:**

Driver's License Number	State of Issue	CDL Endorsement(s)	Expiration Date
Do you have a CDL? <input type="checkbox"/> Yes <input type="checkbox"/> No			What class license do you have? (A,B or C)

**List all motor vehicle accidents in which you were involved in the last three years, including the date of the accident, a brief description, and any resulting injuries or fatalities. Attach additional sheets if needed.**

Date of Accident	Nature: (indicate if it was a head-on, rear-end, upset, roll-over, etc.)	Fatalities	Injuries

**List all violations of motor vehicle laws / ordinances, other than parking violations, where you were convicted or forfeited bond or collateral during the past three years.**

Date of Violation	Location	Charges	Penalty

**Driving Experience:** Please check the types of motor vehicles you have driven and list the approximate length of time you have actually driven the vehicle.

Class of Equipment	Years Operated	Class of Equipment	Years Operated
<input type="checkbox"/> Tri-axle Truck		<input type="checkbox"/> Boom Truck	
<input type="checkbox"/> Low Boy		<input type="checkbox"/> Fuel Truck	
<input type="checkbox"/> End Dump		<input type="checkbox"/> Service Truck	
<input type="checkbox"/> Water Truck		<input type="checkbox"/> Other:	
<input type="checkbox"/> Side Dump		<input type="checkbox"/> Other:	
<input type="checkbox"/> Other:		<input type="checkbox"/> Other:	

**Operating Experience:** Please check the types of equipment you have operated and list the approximate length of time you have actually operated the equipment.

Class of Equipment	Years Operated & Manufacturer	Class of Equipment	Years Operated & Manufacturer
<input type="checkbox"/> Compactor		<input type="checkbox"/> Rubber Tired Backhoe	
<input type="checkbox"/> Crane		<input type="checkbox"/> Excavator / Track Backhoe	
<input type="checkbox"/> Dirt Roller		<input type="checkbox"/> Skid Loader	
<input type="checkbox"/> Dozer		<input type="checkbox"/> Directional Drill	
<input type="checkbox"/> Dump Truck		<input type="checkbox"/> Soil Density Gauge	
<input type="checkbox"/> Gradall		<input type="checkbox"/> Pipe Laser	
<input type="checkbox"/> Grader		<input type="checkbox"/> Grade Laser	
<input type="checkbox"/> Loader		<input type="checkbox"/> Other:	
<input type="checkbox"/> Scraper		<input type="checkbox"/> Other:	

**Heavy Construction Skills / Experience:** Please check any of the skills and/or experiences listed below that you have in the heavy construction services and products industry.

<input type="checkbox"/> Accounting	<input type="checkbox"/> Purchasing	<input type="checkbox"/> Safety
<input type="checkbox"/> Clerical	<input type="checkbox"/> Survey	<input type="checkbox"/> Welder
<input type="checkbox"/> Water Main Installation	<input type="checkbox"/> AutoCAD or Carlson Software (Circle One)	<input type="checkbox"/> Carpenter
<input type="checkbox"/> Engineer	<input type="checkbox"/> Concrete	<input type="checkbox"/> Crew Leader
<input type="checkbox"/> Dirt Grade (Reading / Measuring)	<input type="checkbox"/> Driver	<input type="checkbox"/> Electrician
<input type="checkbox"/> Sewer Grade / Laser Set Up (Calculating)	<input type="checkbox"/> Estimator	<input type="checkbox"/> Flagger / Traffic Control
<input type="checkbox"/> Project Manager	<input type="checkbox"/> Operator	<input type="checkbox"/> Mechanic / Parts
<input type="checkbox"/> Paving	<input type="checkbox"/> Painter	<input type="checkbox"/> Personnel
<input type="checkbox"/> Pipe Layer: <i>What kind?</i>	<input type="checkbox"/> Payroll	<input type="checkbox"/> Earthwork: <i>Bulk Excavating</i>
<input type="checkbox"/> Hazardous Material Training	<input type="checkbox"/> Utility Line Locating / HDD Eclipse	<input type="checkbox"/> Other: <i>Please list below.</i>

List knowledge, skills, and abilities not checked above that you possess and are relevant to the position you seek. Also elaborate on "Please List Below" items that you checked.


**Applicant's Statement of Consent:**

*Please read carefully before signing.*

- The information I have provided in this Application for Employment is true, correct, and complete to the best of my knowledge. I certify that I have answered all questions to the best of my ability and have not withheld any information that would unfavorably effect my application for employment. I acknowledge that misrepresentation or omissions may be the cause for my rejection for employment or may result in my subsequent dismissal if I am hired.
- I hereby consent that Mealy Excavating & Construction, Inc. and its authorized agents may perform background checks and Driver Motor Vehicle requests.
- I hereby further consent to have Mealy Excavating & Construction, Inc. contact anyone it deems appropriate to investigate or verify any information I have provided or to discuss my background, past performance, or suitability for employment. I expressly consent to any discussions regarding the foregoing by any person contacted. I knowingly and voluntarily waive all rights to bring any actions for defamation, invasion of privacy, or similar cause of action against anyone providing such information.
- I understand that employment at Mealy Excavating & Construction, Inc. and its affiliates is an "at-will" which means that either I or Mealy Excavating & Construction, Inc. can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no leader, supervisor, manager, or executive of Mealy Excavating & Construction, Inc., other than the President (by signature), has the authority to create an employment contract other than an at-will employment contract.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**Save & Send**