



1035 Schoolview Dr.
 Marshfield, MO 65706
 Tel. (417) 859-0560 Fax: (417) 859-0589

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: PRINT LEGIBLY				
Fill in appropriate spaces and mark an X in boxes. If you need additional space attach additional sheets of paper and identify entries by number. Failure to complete <u>ALL</u> sections of this application will disqualify you from further consideration.				
1. IDENTIFICATION & PERSONAL DATA				
NAME: LAST, FIRST, MIDDLE, JR / SR			SOCIAL SECURITY NUMBER	
STREET ADDRESS			CITY, STATE, ZIP CODE	
E-MAIL ADDRESS				
HOME TELEPHONE NUMBER ()		BUSINESS TELEPHONE ()		DATE OF BIRTH (MO/DAY/YR)
Will you accept employment anywhere in Missouri? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, state the location preferred.				
Have you ever been convicted of a crime other than a traffic violation? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, explain.				
Is any additional information relative to change of name or maiden name necessary to ensure a check on your work and educational record? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, explain (include dates and list all previous names you have used).				
Are you legally authorized to work in the U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, do you have a work permit? <input type="checkbox"/> YES <input type="checkbox"/> NO				
Date available for employment			What is your salary requirement? \$ per month	
Do you require any special accommodations in the scheduling or administration of examinations or interviews? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please explain				
2. TYPE OF POSITION <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Temporary <input type="checkbox"/> Summer				
Positions applied for:				
1		2		
3		4		
3. EDUCATION RECORD				
	Name and Location	No of years attended	Did you graduate?	Subjects studied
	Grammar School			
	High School			
	College			

Trade, Business, correspondence				
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4. EXPERIENCE RECORD

- List your work experience starting with the most recent. If you have held more than one job with the same organization, list each separately.
- To describe additional work experience or add more details to the "Duties" section, complete a blank sheet of paper using the same format as used here and identify the job to which it relates.

<i>FROM: MONTH / YEAR</i>	<i>TO: MONTH / YEAR</i>
EMPLOYER'S NAME	SALARY
EMPLOYERS ADDRESS	POSTION
BUSINESS PHONE NUMBER	JOB DUTIES

REASON FOR LEAVING

<i>FROM: MONTH / YEAR</i>	<i>TO: MONTH / YEAR</i>
EMPLOYER'S NAME	SALARY
EMPLOYERS ADDRESS	POSTION
BUSINESS PHONE NUMBER	JOB DUTIES

REASON FOR LEAVING

<i>FROM: MONTH / YEAR</i>	<i>TO: MONTH / YEAR</i>
EMPLOYER'S NAME	SALARY
EMPLOYERS ADDRESS	POSTION
BUSINESS PHONE NUMBER	JOB DUTIES

REASON FOR LEAVING

5. MILITARY RECORD

1. Have you served in the U.S. Armed Forces? YES NO

2. Date of service: From To Branch of Service Rank

3. Type of Discharge (if applicable)

6. SUPPLEMENTAL INFORMATION

Operator's License No.	State	Class	Expiration Date
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List any other experience, skills, or qualifications that are pertinent to consideration of employment.



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AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

I hereby request and authorize you to furnish Donco 3 Construction, LLC with any and all information they may request concerning my work record, educational history, military record, traffic record, criminal record, medical history, and general reputation. I also, request and authorize you to furnish any organization or individual conducting a background investigation on behalf of Donco 3 Construction, LLC with this same information. This authorization is specifically intended to include any and all information of a confidential or privileged nature as well as photocopies of such documents, if requested. The information will be used for the purpose of determining my eligibility for employment with Donco 3 Construction, LLC.

I hereby release you and your organization from any liability which may or could result from furnishing the information requested or from any subsequent use of such information in determining my qualifications for employment with Donco 3 Construction, LLC.

A photocopy or facsimile of this release will be valid as an original thereof for one year from date of execution.

Applicant's Signature _____ Date _____

Witness' Signature _____ Date _____

Type or print legibly the following information:

Applicant's Name _____

Date of Birth _____

Social Security Number _____

Current Address _____



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EMPLOYEE EMERGENCY NOTIFICATION

PLEASE COMPLETE INFORMATION AND RETURN TO OFFICE

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE # _____ HEIGHT _____ WEIGHT _____ SEX _____

SOCIAL SECURITY # _____ DATE OF BIRTH _____

DO YOU HAVE ANY PHYSICAL IMPAIRMENTS (HEART PROBLEMS, DIABETES, BACK TROUBLE, EPILEPSY, OR ANYTHING ELSE) THAT MAY INTERFERE WITH YOUR EMPLOYMENT

(CIRCLE ONE) CARPENTER FINISHER LOCAL# _____

(CIRCLE ONE) JOURNEYMAN APPRENTICE PERCENTAGE _____

DO YOU HAVE ANY ALLERGIES TO MEDICATIONS? _____

YES, EXPLAIN _____

WHAT IS YOUR BLOOD TYPE? _____

IN CASE OF EMERGENCY, NOTIFY: _____

TELEPHONE #: _____ RELATIONSHIP: _____

ARE YOU WILLING TO SUBMIT TO RANDOM DRUG TESTING AS A REQUIREMENT OF BEING EMPLOYED BY DONCO 3 CONSTRUCTION?

(CIRCLE ONE) YES NO

SIGNATURE OF EMPLOYEE _____

OFFICE USE ONLY:	DATE OF HIRE:	STARTING RATE OF PAY:
	DATE OF RELEASE:	INCREASED TO:
	REASON:	DATE:



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EMPLOYMENT DRUG TESTING

Please be aware you will be given a drug test with your physical prior to employment, should your test results be positive you will be responsible to pay for the drug testing and will not be eligible for employment at Donco 3 Construction, LLC

Signature _____ Date: _____

Witness Signature _____ Date: _____



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ATTENTION ALL EMPLOYEES

Effective immediately cell phone use is restricted to designated lunch and break times. Cell phones may not be used during working hours without approval.

All employees are expected to be on the job, clocked in and ready to work by the time designated. Effective immediately, any employee who is 15 minutes tardy will be docked 30 minutes pay or sent home.

TODAY'S DATE

WITNESS SIGNATURE

EMPLOYEE SIGNATURE



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Donco 3 Construction, LLC may issue or provide exclusively for the use of Donco 3 business the following: fuel credit cards, including but not limited to Phillips 66, vendor credit cards, including but not limited to, Lowe's, Home Depot, Staples and Sam's Club, vendor charge accounts, including but not limited to O'Reilly Auto Parts, Goedecke Equipment and Supply, and Hertz Rental herein referred to as "ITEMS" and telecommunication devices including but not limited to mobile telephones, landline telephones and radios, "TELECOMMUNICATION DEVICES".

Donco 3 may also issue or provide at the discretion of Donco 3 and exclusively for the use of Donco 3 business a company vehicle "VEHICLE" and or use of company equipment "EQUIPMENT".

Employees agree, by signing below, to use ITEMS, VEHICLES, TELECOMMUNICATION DEVICES and/or EQUIPMENT only for their intended Donco 3 use and not for personal use. Employees who violate this policy or who damage such ITEMS, VEHICLES, TELECOMMUNICATION DEVICES and/or EQUIPMENT are subject to disciplinary action up to and including immediate termination.

Donco 3 may demand reimbursement for misuse, destruction or loss of ITEMS, VEHICLES, TELECOMMUNICATION DEVICES and/or EQUIPMENT property and/or services.

By signing below, you agree to the policy outlined above and are aware of the consequences of violation of this policy.

I, _____ agree to adhere to the above mentioned company policy.

Print Name

Date

Sign Name

Date



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Attendance Requirements:

If you are going to be absent or late for any reason you must do the following:

Notify our business office at 417-859-0560. Leave a message in the general mailbox. The information will be given to your immediate foreman.

If you do not follow the steps, you will be considered a no show and may be subject to disciplinary action.

Signature

Date



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The following tools are required to work in the field for Donco 3 Construction, L.L.C. It is the responsibility of each employee to ensure that they have these tools on the job and ready to use by start time.

TOOL LIST

- HARD HAT
- RUBBER BOOTS
- TAPE MEASURER
- HAMMER
- NAIL APRON
- MAG
- STEEL TROWEL
- MARGIN TROWEL $\frac{1}{2}$ ' RADIUS EDGER

By signing below, you agree that you understand the tool policy as outlined above and agree to abide by Donco 3 Construction, L.L.C. tool policy.

Printed Name

Date

Signature

Date



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BACKGROUND SCREEN INFORMATION

Applicant's Full Name (Printed)

Maiden Name or Other Names Used

Current Address

How Long?

City, State, Zip Code

County

Former Address

How Long?

City, State, Zip Code

County

Date of Birth

Race

Social Security #

Drivers License

Issuing State

Gender

Applicant's



Cell Phone Usage Policy

1. Allow voicemail to handle your calls and return them when safe.
2. If you need to place or receive a call, pull off the road to a safe location and stop the vehicle before using your phone. The only exception to this policy is for calls placed to 9-1-1. If placing or accepting an emergency call, keep the call short and use hands-free options, if available. Ask a passenger to make or take the call.
3. When receiving an emergency call, ask the caller to hold briefly until you can safely pull your vehicle off the road.

Under no circumstances is texting while driving allowed.

Note: Drivers that fail to adhere to the above policy will be subject to disciplinary action.

Signed: _____ Date: _____