



## APPLICATION FOR EMPLOYMENT - 2018

Crooker Construction: 103 Lewiston Road, P.O. Box 5001, Topsham, Maine 04086, 207-729-3331  
Precast of Maine: 139 Main Street Topsham, Maine 04086, 207-729-1628

**Submit completed applications to the office or email to [jobs@crooker.com](mailto:jobs@crooker.com)**

Crooker Construction, LLC consists of Crooker Construction and Precast of Maine. From here on out, both companies will be referred to as 'The Company' or Crooker Construction, LLC. Crooker Construction, LLC appreciates your interest and assures you that we are sincerely interested in your qualifications for employment. This application will be given every consideration, but it does not imply that you will be offered employment. All applications will be considered active for a period of six months.

Crooker Construction, LLC does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, sex, ancestry, veterans, age, mental or physical handicap. Crooker Construction, LLC strictly abides by all State and Federal Employment Laws including but not limited to OSHA, MSHA, NLRB, FMLA and EEOC rules and regulations. No question on this application is intended to secure information to be used for unfair or discrimination purposes.

By signing below and submitting this employment application to Crooker Construction, LLC, you;

- 1) Affirm that the information provided on this employment application and in any other written or verbal response to Crooker Construction, LLC in relation to your being considered for employment by Crooker Construction, LLC is true and complete. **Please note that any intentional deception or false information provided on this employment application or in response to any request for information by Crooker Construction, LLC in relation to your being considered for employment may be considered sufficient cause for denial of your request for employment or dismissal from employment if you are hired by Crooker Construction, LLC.**
  
- 2) Authorize Crooker Construction, LLC, when presenting a job offer, to investigate your personal and employment history by any means, including computer searches, consumer reports, medical records, drivers license records, credit reports, interviews with your neighbors, friends, or others with whom you are acquainted.
  
- 3) Consent to a Pre-Placement Physical. A pre-placement physical is a mandatory requirement for employment at Crooker Construction, LLC, and any offer of employment is contingent upon you successfully completing the mandatory pre-employment physical. The physical will be conducted by OHA in West Bath, and will be at no cost to the applicant. The pre-placement physical will consist of: Comprehensive medical history, Vision Testing, Lifting Assessment, Range of Motion Test, Grip Strength Test, Full Screen Physical, and Drug Screen. Cholesterol Screen, Spirometry Test or a Hearing Test may be required based upon the position applied for. All medical tests are intended to confirm that the applicant is able to perform the essential functions of the job for which they are being considered. You will need to bring your medical history with you to the pre-placement physical or provide OHA with your current primary care provider and/or previous occupational health provider's contact information. *(Revised on 06/13/16)*

Print Name: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Thank you for taking the time to apply for a position at Crooker Construction, LLC and Precast of Maine!

Position(s) applied for: \_\_\_\_\_ Salary Requirements: \_\_\_\_\_

Full-time?: \_\_\_ Part-time?: \_\_\_ Specify hours available: \_\_\_\_\_ Date available for work: \_\_\_\_\_

Are you at least 18 yrs old? \_\_\_ Were you previously employed by us? \_\_\_ If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony/misdemeanor? Yes \_\_\_ No \_\_\_ If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_

Are there any circumstances that could prevent you from being at work on our regular work hours?

Yes \_\_\_ No \_\_\_

How did you happen to apply at Crooker Construction, LLC? \_\_\_\_\_

Were you referred by a current Crooker Construction or Precast of Maine employee? Yes \_\_\_ No \_\_\_

If yes, by who? \_\_\_\_\_

**Education: List all schools attended.**

| Name & Address of School  | Graduate? | Degree | Curriculum/Major |
|---------------------------|-----------|--------|------------------|
| High/Prep: _____<br>_____ | _____     | _____  | _____            |
| College: _____<br>_____   | _____     | _____  | _____            |
| Other: _____<br>_____     | _____     | _____  | _____            |

**Special Skills: Please list special skills/abilities (i.e., equipment or mechanical experience, licenses, software familiarity, etc.)**

\_\_\_\_\_  
\_\_\_\_\_

**Employment History: List employment history for your TWO most recent positions.**

Present/Most Recent Employer \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ May we contact this employer? Yes \_\_\_ No \_\_\_

Supervisor \_\_\_\_\_ Nature of Business \_\_\_\_\_

Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Starting Salary \_\_\_\_\_ per \_\_\_ Ending Salary \_\_\_\_\_ per \_\_\_

Title (s) and Description of Duties: \_\_\_\_\_  
\_\_\_\_\_

Reason(s) for leaving \_\_\_\_\_

Which duties would you have preferred to have done more of? \_\_\_\_\_

Which duties would you have preferred to have done less of? \_\_\_\_\_

Previous to Most Recent Employer \_\_\_\_\_ Phone (     ) \_\_\_\_\_

Address \_\_\_\_\_ May we contact this employer? Yes \_\_\_ No \_\_\_

Supervisor \_\_\_\_\_ Nature of Business \_\_\_\_\_

Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Starting Salary \_\_\_\_\_ per \_\_\_ Ending Salary \_\_\_\_\_ per \_\_\_

Title (s) and Description of Duties: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Reason(s) for leaving \_\_\_\_\_

Which duties would you have preferred to have done more of? \_\_\_\_\_

Which duties would you have preferred to have done less of? \_\_\_\_\_

**Driver's License Information:**

Do you have a valid driver's license? Yes \_\_\_ No \_\_\_ Driver's license state and number \_\_\_\_\_

Addresses where applicant resided 3 years preceding application date:

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|        |      |       |     |
|--------|------|-------|-----|
| Street | City | State | Zip |
|--------|------|-------|-----|

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|        |      |       |     |
|--------|------|-------|-----|
| Street | City | State | Zip |
|--------|------|-------|-----|

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|        |      |       |     |
|--------|------|-------|-----|
| Street | City | State | Zip |
|--------|------|-------|-----|

**Professional References**

List three persons for references, other than family members, who have knowledge of your safety and work habits.

#1 Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How do you know this reference? \_\_\_\_\_

#2 Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How do you know this reference? \_\_\_\_\_

#3 Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How do you know this reference? \_\_\_\_\_

I am aware, by signing below, that federal law provides for imprisonment and/or fines for false statements or the use of false documents in connection with the completion of this form.

Applicants Name: \_\_\_\_\_ Date: \_\_\_\_\_

Applicants Signature: \_\_\_\_\_

If you have a commercial Driver's License (CDL) please complete this page

| <b>Drivers licenses held in the past 3 years must be shown</b> | <b>State</b> | <b>License No.</b> | <b>Class</b> | <b>Endorsement(s)</b> | <b>Expiration Date</b> |
|--|--------------|--------------------|--------------|-----------------------|------------------------|
|  |              |                    |              |                       |                        |
|  |              |                    |              |                       |                        |
|  |              |                    |              |                       |                        |

Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes\_\_ No\_\_  
 Has any license, permit or privilege ever been suspended or revoked? Yes\_\_ No\_\_  
 Have you ever been disqualified for violations of Federal Motor Carrier Safety Regulations? Yes \_\_ No\_\_  
 If you answered "yes" to any of the above questions, please attach a statement giving details.

**Driving Experience**

| <b>Class of Equipment</b> | <b>Type of Equipment (Van, Tank, Flat, Dump)</b> | <b>Dates From To</b> | <b>Approximate Total Miles</b> |
|---------------------------|--|----------------------|--------------------------------|
| Straight Truck            |  |                      |                                |
| Tractor and Semi-Trailer  |  |                      |                                |
| Other                     |  |                      |                                |

**Accident Review for the Past 3 Years**

| <b>Date Most Recent First</b> | <b>Nature of Accident (Head-On, Rear-End, Overturn, etc.)</b> | <b>Fatalities</b> | <b>Injuries</b> |
|-------------------------------|---|-------------------|-----------------|
|                               |   |                   |                 |
|                               |   |                   |                 |
|                               |   |                   |                 |

**Traffic Convictions and Forfeitures for the past 3 years (do not include parking violations)**

| <b>Location</b> | <b>Date</b> | <b>Charge</b> | <b>Penalty</b> |
|-----------------|-------------|---------------|----------------|
|                 |             |               |                |
|                 |             |               |                |
|                 |             |               |                |

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Applicants Name: \_\_\_\_\_ Date: \_\_\_\_\_

Applicants Signature: \_\_\_\_\_

