GUELICH EXCAVATION LLC

EMPLOYMENT APPLICATION

Curwensville (814) 592-0952 · Beaver (717) 802-2370
contact@guelichexcavationllc.com · guelichexcavationllc.com

Please complete all applicable fields

Return completed applications by email to contact@guelichexcavationllc.com or drop off at our Curwensville or Beaver office.

APPLICANT INFORMATION

Full Name

Date

Position Applied For

Street Address

City

State

ZIP Code

Date Available

Phone

Email

Desired Wage

Are you at least 18 years old? ☐ Yes ☐ No

Are you legally authorized to work in the U.S.? ☐ Yes ☐ No

Applying for a position that requires a CDL? ☐ Yes ☐ No

DRIVER INFORMATION – DRIVER APPLICANTS

Complete this section if you are applying for a CDL or driving position (required by FMCSA, 49 CFR 391.21).

Date of Birth

Driver's License / CDL Number

State

Expiration Date

License Class

Endorsements

DOT Medical Card Expiration

Previous Addresses – Past 3 Years

List every address where you lived in the past 3 years, if different from your current address.

Previous Address 1 (street, city, state, ZIP)

From – To

Previous Address 2 (street, city, state, ZIP)

From – To

Other Driver's Licenses Held – Past 3 Years

State	License Number	Class	Endorsements	Expiration

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

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DRIVER INFORMATION – DRIVER APPLICANTS (CONTINUED)

If yes to either question, please explain

Driving Experience

Enter the dates and approximate total miles for each class of equipment you have driven.

	From	To	Approx. Total Miles
Straight Truck			
Tractor & Semi-Trailer			
Tractor – Two Trailers			
Other (describe)			

Accident Record – Past 3 Years

List all motor vehicle accidents in the past 3 years. If none, write NONE.

Date	Nature of Accident (head-on, rear-end, etc.)	# Fatalities	# Injuries	Hazmat Spill?

Traffic Convictions & Forfeitures – Past 3 Years

List all traffic convictions and bond forfeitures (other than parking) in the past 3 years. If none, write NONE.

Date	Location (city/state)	Charge	Penalty

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EMPLOYMENT HISTORY

List every employer for the past 3 years, most recent first. Driver applicants: also list every employer you drove a commercial motor vehicle for in the past 10 years. Attach additional sheets if needed.

Employer 1 (most recent)

Employer Name | **Phone** | **Supervisor**

Address (street, city, state, ZIP)

From (mo/yr) | **To (mo/yr)** | **Job Title** | **Reason for Leaving**

Responsibilities

Driver applicants: were you subject to the FMCSRs while employed here?

☐ Yes ☐ No

Driver applicants: was this a DOT safety-sensitive job subject to drug & alcohol testing?

☐ Yes ☐ No

Employer 2

Employer Name | **Phone** | **Supervisor**

Address (street, city, state, ZIP)

From (mo/yr) | **To (mo/yr)** | **Job Title** | **Reason for Leaving**

Responsibilities

Driver applicants: were you subject to the FMCSRs while employed here?

☐ Yes ☐ No

Driver applicants: was this a DOT safety-sensitive job subject to drug & alcohol testing?

☐ Yes ☐ No

EMPLOYMENT HISTORY (CONTINUED)

Employer 3

Employer Name | **Phone** | **Supervisor**

Address (street, city, state, ZIP)

From (mo/yr) | **To (mo/yr)** | **Job Title** | **Reason for Leaving**

Responsibilities

Driver applicants: were you subject to the FMCSRs while employed here?

☐ Yes ☐ No

Driver applicants: was this a DOT safety-sensitive job subject to drug & alcohol testing?

☐ Yes ☐ No

Employer 4

Employer Name | **Phone** | **Supervisor**

Address (street, city, state, ZIP)

From (mo/yr) | **To (mo/yr)** | **Job Title** | **Reason for Leaving**

Responsibilities

Driver applicants: were you subject to the FMCSRs while employed here?

☐ Yes ☐ No

Driver applicants: was this a DOT safety-sensitive job subject to drug & alcohol testing?

☐ Yes ☐ No

Please explain any gaps in employment

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EQUIPMENT EXPERIENCE

Check each type of equipment you have operated and enter approximate years of experience.

☐ Excavator	**Years:**		☐ Dozer	**Years:**	
☐ Backhoe	**Years:**		☐ Skid Steer	**Years:**	
☐ Loader	**Years:**		☐ Grader	**Years:**	
☐ Roller	**Years:**		☐ Dump Truck	**Years:**	
☐ Lowboy	**Years:**		☐ GPS Machine Control	**Years:**	
☐ Pipe Lasers	**Years:**				

Other Equipment / Specialized Skills

PROFESSIONAL REFERENCES

Reference 1 – Name	**Relationship**	**Phone / Email**
Reference 2 – Name	**Relationship**	**Phone / Email**
Reference 3 – Name	**Relationship**	**Phone / Email**

EMERGENCY CONTACT

Name	**Relationship**	**Phone**

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APPLICANT CERTIFICATION & AUTHORIZATIONS

Certification

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that false, misleading, or omitted information may result in disqualification from employment or termination if employed.

At-will employment

I understand that if I am hired, my employment is at will, meaning either Guelich Excavation LLC or I may end it at any time, with or without cause or notice, and that nothing in this application creates a contract of employment.

Authorization to investigate

I authorize Guelich Excavation LLC to verify the information in this application and to contact my previous employers and references. For driving positions, I authorize Guelich Excavation LLC to obtain my motor vehicle record and to investigate my safety performance history with previous DOT-regulated employers as required by 49 CFR 391.23. I release all parties providing this information from any liability. I understand separate written consent forms may be required.

Drug & alcohol testing

I understand that positions requiring a CDL are subject to U.S. DOT drug and alcohol testing rules, including a pre-employment drug test, and that an offer of employment for such a position depends on a verified negative result.

Equal opportunity employer

Guelich Excavation LLC is an equal opportunity employer. Applicants are considered without regard to race, color, religion, sex, national origin, age, disability, veteran status, or any other status protected by law.

By signing below, I acknowledge that I have read and agree to all of the statements above.

Applicant Signature	Date