



THE COLEMAN COMPANIES

ALVIN J. COLEMAN & SON, INC.
COLEMAN CONCRETE, INC.
COLEMAN RENTAL & SUPPLY, INC.

9 NH ROUTE 113 ❖ CONWAY, NH 03818 TEL. 603-447-5936 ❖ FAX 603-447-5839

Company Applying With: CONCRETE CONSTRUCTION RENTAL Date of Application:

Position(s) Applied for: Other: Telephone #:

Name: (Last) (First) (Middle) Social Security # - -

Mailing Address: Street City State Zip

Physical Address: Street City State Zip

Previous Address: Street City State Zip

Have you applied with The Coleman Companies before? No Yes (If Yes) When?

Have you ever been employed by The Coleman Companies? No Yes (If Yes) When?

Supervisor/Foreman worked for:

Are you eligible to work in the United States? (Proof of eligibility will be required upon employment)

Are you at least 18 years of age?

Are you currently employed? How long since you last worked?

Yes, with whom?

May we contact your present employer? Yes No

Contact name and phone number

Date Available: Desired Salary:

Valid Driver's License Yes No State Expires

Have you had any injuries in the last 12 months? Work related?

If yes, please explain

IF YOU HAVE EVER BEEN CONVICTED OF A CRIME (FELONY OR MISDEMEANOR) THAT HAS NOT BEEN OFFICIALLY ANNULLED BY A COURT, YOU MUST COMPLETE THE FOLLOWING SECTION GIVING THE DATE, LOCATION AND NATURE OF THE CONVICTION.

If you leave this section blank, you are certifying that you have no current record of conviction.

Please note: Conviction is not an automatic disqualifier for employment. Each case is considered individually.

OMISSION OF REQUIRED INFORMATION WILL BE A BASIS FOR REJECTION OF YOUR APPLICATION.

How did you hear about us?

Please list any other skills, certificates, licenses or awards that you have that may apply to work with The Coleman Companies:

TO BE READ AND SIGNED BY APPLICANT

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I understand that the information provided herein may be used and that my prior employers may be contacted for the purpose of investigating my background. I further understand and agree that if hired my employment is “at will” for no definite period and may, regardless of the date of payment of my wages or salary, be terminated at any time without prior notice, for any reason, and that in no way is to be construed as a contract of employment. The Coleman Companies conduct random drug tests for all employees.

Signature:

Date:

*In compliance with Federal and State Equal Employment Opportunity Laws, qualified applicants are considered for all positions without regard to race, color, religion, gender, national origin, age, marital status or non-job related disability.
Women and minorities are encouraged to apply.*

<u>FOR OFFICE USE ONLY</u>	INITIAL	DATE
APPLICATION LOGGED BY:		
APPLICANT CALLED BY:		
APPLICANT INTERVIEWED BY:		
STATUS: HIRED YES OR NO		

EDUCATION

Highest Grade Completed:

College:

Name

City/State

Year Graduated

Degree

High School

College

Trade School

Other

Please check **ALL** Equipment Experience

Truck Driver

Tractor

10W

Tri-axle

Crane, tons

CDL-A

CDL-B

Hazmat

Tank

Track

Boom Truck

Bulldozer, size(s)

Loader, size(s)

Excavator, size (s)

Hydraulic

Gradall

Grader

Roller

Other

EMPLOYMENT HISTORY

NOTE All driver applicants to drive in interstate commerce must provide the following information on all employers during the preceding years. List complete mailing address, street number, city, state and zip code. Applicants to drive commercial motor vehicle in intrastate or interstate commerce shall provide an additional 7 years information on those employers for whom the applicant operated such vehicle.

EMPLOYER	DATE
NAME	FROM TO
ADDRESS	POSITION HELD
CITY STATE ZIP	SALARY/WAGE
CONTACT PERSON PHONE #	REASON FOR LEAVING

EMPLOYER	DATE
NAME	FROM TO
ADDRESS	POSITION HELD
CITY STATE ZIP	SALARY/WAGE
CONTACT PERSON PHONE #	REASON FOR LEAVING

EMPLOYER	DATE
NAME	FROM TO
ADDRESS	POSITION HELD
CITY STATE ZIP	SALARY/WAGE
CONTACT PERSON PHONE #	REASON FOR LEAVING

EMPLOYER			DATE	
NAME			FROM	TO
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE #	REASON FOR LEAVING	

EMPLOYER			DATE	
NAME			FROM	TO
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE #	REASON FOR LEAVING	

EMPLOYER			DATE	
NAME			FROM	TO
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE #	REASON FOR LEAVING	

EMPLOYER			DATE	
NAME			FROM	TO
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE #	REASON FOR LEAVING	

EMPLOYER			DATE	
NAME			FROM	TO
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE #	REASON FOR LEAVING	

EMPLOYER			DATE	
NAME			FROM	TO
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE #	REASON FOR LEAVING	