



# BROOKLAWN PAVING, LLC

Ben Bruckhart, *President*

39 Brooklawn Rd. Lititz, PA 17543  
Phone: 717-665-2558 Fax: 717-665-2936  
www.brooklawnpaving.com  
HIC: PA020027

## APPLICATION FOR EMPLOYMENT

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_ Soc Sec #: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Previous address if at present less than 3 years: \_\_\_\_\_

Phone #: \_\_\_\_\_

## PERSONAL INFORMATION

Do you have the legal right to live and work in the U.S.? Yes \_\_\_ No \_\_\_

Are you currently employed? Yes \_\_\_ No \_\_\_

If not, how long since leaving last employment? \_\_\_\_\_

May we contact your present employer? Yes \_\_\_ No \_\_\_

Have you been convicted of a felony in the last 7 years? Yes \_\_\_ No \_\_\_

*(Conviction will not necessarily disqualify an applicant for employment.)*

If yes, please explain: \_\_\_\_\_

Do you have a current PA Driver's License? Yes \_\_\_ No \_\_\_

Do you have a CDL Class A? Yes \_\_\_ No \_\_\_

Do you have dependable transportation to & from work? Yes \_\_\_ No \_\_\_

Are you on layoff and subject to recall? Yes \_\_\_ No \_\_\_

On what date would you be available for work? \_\_\_\_\_

Position for which you are applying: \_\_\_\_\_

## YOUR GOALS

What are your goals? \_\_\_\_\_

What talents or skills would you like to develop in the future? \_\_\_\_\_

## EDUCATION

Circle highest grade completed: High School 9 10 11 12

College, Trade, Business School 1 2 3 4

Last school attended: Name \_\_\_\_\_

Address \_\_\_\_\_

What was your favorite subject? \_\_\_\_\_

What was your least favorite subject? \_\_\_\_\_

Do you have military experience? Yes \_\_\_ No \_\_\_

If yes, what branch? \_\_\_\_\_ Rank achieved: \_\_\_\_\_

Special schools or training: \_\_\_\_\_



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## EMPLOYMENT RECORD

Last Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Supervisor: \_\_\_\_\_ Hourly Rate/ Salary: \_\_\_\_\_

Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Second Last Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Supervisor: \_\_\_\_\_ Hourly Rate/ Salary: \_\_\_\_\_

Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Third Last Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Supervisor: \_\_\_\_\_ Hourly Rate/ Salary: \_\_\_\_\_

Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

*-Attach Resume if appropriate-*

## SKILLS & QUALIFICATIONS

State any additional information you feel may be helpful to us in considering your application. Summarize special job-related skills and qualifications from employment or other experiences: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List special accomplishments, publications, awards: \_\_\_\_\_  
\_\_\_\_\_

List any additional information you would like us to consider: \_\_\_\_\_  
\_\_\_\_\_

## REFERENCES

List name and telephone number of 3 business/ work references who are not related to you. If not applicable, list 3 personal references who are not related to you.

|    | Name  | Telephone | Years Known |
|----|-------|-----------|-------------|
| 1. | _____ | _____     | _____       |
| 2. | _____ | _____     | _____       |
| 3. | _____ | _____     | _____       |



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## APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at the time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the employer.

I understand that Brooklawn Paving, LLC may require job applicant to undergo pre-employment testing for use of illegal substances. If employed by Brooklawn Paving, I agree to conform to its policies and procedures and my employment can be terminated at any time, with or without cause, at the discretion of either Brooklawn Paving or myself.

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

\_\_\_\_\_  
Date

In case of emergency, notify:

Name \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_

Please list any employers or supervisors you do NOT wish Brooklawn Paving to contact: