

Date:	
Name:	
Address:	
Cell Phone:	Date of Birth:
Email:	
Position applied for:	Full-time 🔲 Part-time 🔲 Summer 🔲
Are you currently employed? Yes \(\square\) No \(\square\)	If yes, where?
Can we contact your current employer? Yes 🗌	No Phone #:
Date you are available to start work:	How did you learn about us?
Are you prevented from lawfully becoming emplo	oyed in this country because of Visa or Immigration
status?	
Yes No Proof of citizenship or immigration	status will be required upon employment
Have you been convicted of a felony within the la	ast 7 years? Yes 🗌 No 🔲
If yes, please explain:	
A conviction does not disqualify you for employment	
Are you available for work Monday-Friday 7:00 a	ı.m. to 5:00 p.m.?Yes
All positions require heavy lifting. Can you lift up	to 70 pounds?Yes \[\] No \[
Do you work well with others? Yes \(\square\) No	
Are you capable of getting to work on time every	day?Yes
Do you have a dependable mean of transportation	on getting to work?Yes ☐ No ☐
List name and daytime phone # of person to noti	fy if emergency occurs:
AND SOCIAL SECURITY CARD FOR US TO COPY AND PUT IN YO	ED. UPON HIRE YOU WILL NEED TO PROVIDE YOUR DRIVERS LICENSE DUR FILE. IF LESS THAN 18 YEARS OF AGE A WORK PERMIT MUST BE CQUIRED.
EDUCATION	
High School:	City:
	duate? Yes 🔲 No 🔲 GED 🗌
College/University:	City:
From: To: Did you Grad	duate? Yes 🗌 No 🗌 Degree:
Graduate and Up:	City:
From: To: Did you Grad	duate? Yes 🗌 No 🗌 Degree:

Describe any specialized training, apprenticeship, skills and extracurricular activities:						
Honors Receive	ed:					
EMPLOYM	ENT EXPERIE	ENCE				
Please start wit years for relativ	•	nost recent employment. C	Only include	jobs held within the l	ast five	
Company:		 	Phone: _			
Address:						
Contact:			Contact E	mail:		
Job Title:		Starting Salary:	\$	Ending Salary: \$_		
Responsibilities	s:					
From:	To:	Reason for Leav	ving:			
May we contact	t your previous sup	ervisor for a reference?		Yes	No 🗌	
Company:			Phone:			
			_			
			Contact E	mail:		
		Starting Salary:				
Responsibilities	s:					
From:	To:	Reason for Leav	ving:			
May we contact	t your previous sup	ervisor for a reference?		Yes	No 🗌	
Company:			Phone: _			
Address:						
Contact:			Contact E	mail:		
Job Title:		Starting Salary:	\$	Ending Salary: \$_		
Responsibilities	S:					
From:	To:	Reason for Leav	 ving:			
May we contact	t your previous sup	ervisor for a reference?		Yes □	No 🗌	

ourninanzo opeoiar e	kills and qualifications ac	equired from employment or other experience:
State any additional	information you feel may	be helpful to us in considering your application:
· · · · · · · · · · · · · · · · · · ·		
managers, military se		and your abilities. References can include former chers or professors, professional and personal
Name:		
vario.		Name:
		Name:
itle:		Name:
Fitle: Connection:		Name: Title: Connection:
Fitle: Connection: Phone Number:		Name: Title: Connection: Phone Number:
Fitle: Connection: Phone Number: Address:		Name: Title: Connection: Phone Number: Address:
Title: Connection: Phone Number: Address:		Name: Title: Connection: Phone Number: Address:
Title: Connection: Phone Number: Address:		Name: Title: Connection: Phone Number: Address:
Fitle: Connection: Phone Number: Address:		Name: Title: Connection: Phone Number: Address:
Fitle: Connection: Phone Number: Address:	Name:	Name: Title: Connection: Phone Number: Address: Email:
Fitle: Connection: Phone Number: Address:	Name:	Name: Title: Connection: Phone Number: Address: Email:
Title: Connection: Phone Number: Address:	Name: Title: Connection:	Name: Title: Connection: Phone Number: Address: Email:
Title: Connection: Phone Number: Address:	Name: Title: Connection: Phone Number:	Name:

Krukowski Stone Company, Inc. is an equal opportunity employer. Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

APPLICANTS 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 30 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 that time.

I hereby understand and acknowledge that, unless otherwise defined by application 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.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. Invalid after 30 days.

Signature of Applicant	Date	
FOR PE	RSONNEL DEPARTMENT USE ONLY	
Arrange Interview: Yes □ Remarks:	No □	Date
Employed: Yes □ No Job Title:	□ Date of Employment: _ Hourly Rate: Department: By:	
	Name and Title	Date

If applying online, please email application as a PDF attachment to Joanie Whitt joaniew@krukowskistone.com. The subject should title: "Job Application, Last Name" *Please insert last name on application after Job Application in subject.

