



MEIGS

Paving Asphalts & Emulsions

1220 Superior Street
Portage, WI 53901
(608) 742-5354

122 Sycamore Street
Abbotsford WI 54405
(715) 223-3400

Application for Employment

P E R S O N A L	Last Name	First Name	Middle	Date of Application
	Street Address			Home Telephone
	City, State, Zip			Business Telephone
	Have you ever applied for employment with us <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Month & Year _____			Social Security Number
	Position Applied For			Pay Expected
				Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are you legally eligible for employment in the United States?			When will you be available to begin work? _____
	Other special training or skills (languages, machine operation, etc.)			

E D U C A T I O N	School	Name and Address of School	Course of Study	# of Years Completed	Did you Graduate	Diploma / Degree
	College / Technical				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Diploma <input type="checkbox"/> GED
	Elementary School					

M I L I T A R Y	Did you serve in the U.S. Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", in what Branch?
	Describe any training received relevant to the position for which you are applying.	

Membership in Professional or Civic Organizations (Which you consider relevant to your ability to perform this work)

FOR EMPLOYERS USE ONLY

R E F E R E N C E C H E C K	Employer	Person Contacted	Results
	1		
	2		
	3		

T E S T R E S U L T S	Tests Administered	Raw Score	Rating	Analysis and Comments

I N T E R V I E W R E S U L T S	Interviewer Name and Comments



MEIGS

Paving Asphalts & Emulsions

Reference Release Form

Applicant Name: _____

Former Employer: _____

Social Security #: _____ Date employed: _____

The above named applicant is being considered for employment with Henry G. Meigs L.L.C., and has listed your organization as a former employer. We would appreciate your verification and completion of this form at your earliest convenience. Information provided will be treated in confidence. Please return this form to us in the enclosed, self-addressed, stamped envelope. Thank you for your assistance.

Applicants Authorization

I consent to and authorize the above named former employer, and its agents and employees, to furnish any reference information concerning me, including achievement, wage history, performance, attendance, personal history, disciplinary information and reason for separation of employment, relating to my employment with the former employer. It is expressly understood that any information given is to be used for the purpose of determining my acceptability for employment. I also hereby release the above named former employer, and its agents and employees, from all liability for damages or claims, including but not limited to defamation, interference with contract, or prospective economic advantage and negligence, I have or may have which arise or result from any reference information provided pursuant to this authorization or any attempts to comply with this information.

Applicants Signature: _____ Date: _____

Record of Employment

Position Held: _____ Dates Employed: _____

Summary of essential duties: _____

Reason for leaving: _____

Salary at termination: _____ Eligible for Rehire? _____ Yes _____ No

Please rate the following:	Excellent	Good	Average	Fair	Poor
Job Knowledge	_____	_____	_____	_____	_____
Accuracy	_____	_____	_____	_____	_____
Productivity	_____	_____	_____	_____	_____
Dependability	_____	_____	_____	_____	_____
Attendance	_____	_____	_____	_____	_____
Overall Performance	_____	_____	_____	_____	_____

Comments: _____

Signature: _____ Title: _____ Date: _____