

Employment Application

Red River Waste Solutions, LP

4004 E. US Hwy. 290 • Dripping Springs, TX 78620

Phone: (512) 858-0400 • Fax: (512) 858-2612

www.rrws.com

Personal Data

Name		Social Security Number xxx-xx- <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Email Address:	
Telephone No: Home: Business:		Date		Address (street, City, State & Zip):	
Position(s) applying for:				Do you have a security clearance? <input type="checkbox"/> YES <input type="checkbox"/> NO Level?	
If hired, can you provide proof of US citizenship? <input type="checkbox"/> YES <input type="checkbox"/> NO		Are you 18 or over? <input type="checkbox"/> YES <input type="checkbox"/> NO		Do you have any friends or relatives employed by this company? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you been convicted of a crime (other than traffic violations) or been imprisoned during the last seven years? <input type="checkbox"/> YES <input type="checkbox"/> NO				If yes, at what contract location?	
Have you had a moving traffic violation within the past 5 years? <input type="checkbox"/> YES <input type="checkbox"/> NO				Referred by:	

Education Record (Attach additional sheet if required)

Name	Address	Number of Years Attended	Degrees or Diplomas
High School			
College or University			
Trade or Technical School			

Military History

Branch of Service	Date of Service	Duties/special training (Attach additional sheet if required)
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Employment History (Provide information for last five years, most recent first. Attach additional if required)

Employer		Dates		Address	
Telephone No.	Supervisor's Name		Why did you leave?	Beginning Salary	Ending Salary
Title / Duties					
Employer		Dates		Address	
Telephone No.	Supervisor's Name		Why did you leave?	Beginning Salary	Ending Salary
Title / Duties					

Employer		Dates	Address		
Telephone No.	Supervisor's Name		Why did you leave?	Beginning Salary	Ending Salary
Title / Duties					
Business References <i>List 2-professional references and 1-personal reference, who are familiar with the quality of your work, have worked directly with you, and who are not relatives.</i>					
Reference			Address		
Telephone No: Home: Business:			Relationship		
Reference			Address		
Telephone No: Home: Business:			Relationship		
PERSONAL Reference			Address		
Telephone No: Home: Business:			Relationship		
Emergency Contact					
In case of an accident, illness, or emergency, please contact:					
Name:		Daytime Phone:		Relationship:	
Address:					
<p>I hereby apply for employment with Red River Waste Solutions, LP (hereinafter referred to as RRWS). I specifically verify that all information provided in the Application for Employment is true, complete & correct.</p> <p>I understand & agree that the omission or misrepresentation of any fact in the Application for Employment will be sufficient reason for RRWS to deny me employment. I also understand and agree that should I become employed by RRWS and it is later discovered I have omitted or misrepresented any fact in this Application, in any supplement thereto, or any other corporate record, RRWS may immediately terminate my employment upon discovery of such omission or misrepresentation.</p> <p>I authorize RRWS to obtain a consumer report containing information regarding my prior driving history, criminal history and/or education in connection with evaluating me for employment, promotion, reassignment or retention as an employee.</p> <p>I will abide by the safety rules, including for all workers compensation and auto accidents. Workers Compensation or Auto accidents not reported the same day, may result up to and including termination and possible denial of any claim. If injured, I authorize RRWS to use best judgment for treatment unless I instruct otherwise.</p> <p>I understand and agree to the information shown above.</p>					
Applicants signature					Date