J. Kozel & Son, Inc.

Corporate Headquarters
1150 Scottsville Road, Rochester, NY 14624
Phone: (585) 436-9807

Employment Application

_____
Position Applying For

Name: _____
First Middle Last

Address: _____
Street City State Zip Code

Date of Birth: _____ Social Security #: _____

Cell Phone #: (_____)_____ Home Phone #: (_____)_____

E-Mail Address: _____

Are you legally eligible to work in the U.S.? ( ) YES ( ) NO

I have a valid Drivers License? ( )YES ( )NO Drivers License #: _____

I will be available to start work: _____

Availability: I can work overtime: ( ) YES ( ) NO

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start							
End							

Education:

	# of years	field of study	graduation year
High School			
College			
Business/Technical			
Other			

Military Service? ( ) Yes ( ) No Duty/Specialized Training: _____

_____

References:

Name	Phone	Relation	Yrs Known

Continued on page 2

Employment:

Please list past jobs from most recent to oldest, including summer and temporary jobs. **Must list complete mailing address**

CDL/Commercial Motor Vehicle Applicants:
Applicants that desire to drive in intrastate/interstate commerce must provide the following information on all employers during the previous 3 years. You must give the same information for all employers you have driven a commercial motor vehicle for the 7 years prior to the initial three years (total of 10 years employment record). Use page 6 if more space is needed

Employer Name: ____________________

Address: ____________________
Street City State Zip Code

Position: ____________________ Duties/Responsibilities: ____________________

____

Supervisor: ____________________
Name Phone #

Hire Date: ____________________ Employment End Date: ____________________

Reason for Leaving: ____________________

____

For CDL/Commercial Motor Vehicle Applicants Only:
Were you subject to the Federal Motor Carrier Safety Regulations (FMCSRs) while employed by the previous employer? ( ) Yes ( ) No
Was the previous job position designated as a safety sensitive function in any DOT regulated mode, subject to alcohol and controlled substances testing requirements as required by 49 CFR Part 40? ( ) Yes ( ) No

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Street City State Zip Code

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Continued on page 3

Any gaps in employment and/or unemployment must be explained. Include dates (month/year): _____

_____

_____

_____

Types of equipment you are qualified to operate: _____

_____

_____

Professional licenses, certifications, registrations: _____

_____

_____

Other skills you wish to bring to the employers attention: _____

_____

_____

****If applying for a CDL Driver position, or any position requiring****
you to drive a commercial motor vehicle pages 4-5 must be completed

Information to the applicant:

As a part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

If necessary for employment, you may be required to:

- Supply your birth certificate or other proof of authorization to work in the United States
- Have a physical examination and/or drug test
- Sign a conflict of interest agreement and abide by its terms

I understand and agree to the information shown above:

_____

Signature Date

Equal Employment Opportunity:

While many employers are required by law to have an affirmative action program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

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