# **TULL COMPANIES**

# **EMPLOYMENT APPLICATION FORM**

## ALL NEW EMPLOYEES WILL BE TESTED FOR DRUGS AND ALCOHOL

FIRST NAME:		MIDDLE:		L/	<u> </u>			_
PHYSICAL ADDRESS:								
CITY:		STATE:		ZIP:				
MAILING ADDRESS: (IF DIFFER	ENT FROM ABOVE):							_
		STATE:	STATE:		Z	ZIP:		
<u>PHONE</u> ()								
EMAIL (Paystubs and other i								
EMERGENCY CONTACT: NAI								
DATE OF BIRTH:								
DATE AVAILABLE FOR WORK:		POSITION APPL		LIED FOR:				
SALARY DESIRED:	<u>E</u>	MPLOYMENT DESIRED		Full-Time	<u> </u>	Part-1	Time	_ Temp
NCCCO CERTIFICATIONS:								
EDUCATION	Location			Did yo Gradu		Major		
High School								
College								
Trade, Business or								
Correspondence School								
Other (specify)								
Are you legally eligible to vare you over the age of 18 Are you available to work Can/will you travel if requested the you ever been convictly yes, please explain:	3? overtime hours ired by this posi cted of a <b>FELON</b>	tion? <b>Y</b> ?		Yes _ Yes _		No No No		
Do you have a valid driver	's license?			Yes _		No		
Driver's License Number _		State of iss	sue		CDL?		_ Yes	No
Endorsements								
Have you had any acciden	ts during the pa	st three years?	Yes		No H	ow Mar	ıy?	
Have you had any moving								
Are you proficient at pullir							Somewhat	
	_							
Military Experience:								
Branch of Service:			Dates Se	ates Served:				
Rank at Discharge:			_					
Education & Training:								

Describe equipment you are familiar with:	
Work Experience: Please list your work experience for the past five y	
self-employed, give company name. Attach additional sheets if nece information not found on resume.	essary. If resume is provided, please complete fields that ask r
Name of Employer:	Employment Dates:
Address:	
Name of Supervisor**:	
Pay or Salary: Start Final	
May we contact employer prior to hiring? Yes _	No
Reason for Leaving (be specific)?	
List of jobs you held, duties performed, skills used or learned, a	advancements or promotions while you worked at this
company:	
Name of Employer:	Employment Dates:
Address:	
Name of Supervisor**:	Your Last Job Title:
Pay or Salary: Start Final	
May we contact employer prior to hiring? Yes _	No
Reason for Leaving (be specific)?	
List of jobs you held, duties performed, skills used or learned, a	advancements or promotions while you worked at this
company:	
Name of Employer:	Employment Dates
Address:	
Pay or Salary: Start Final	Tour East Job Title.
May we contact employer prior to hiring? Yes	No
Reason for Leaving (be specific)?	
heason for Leaving (be specific):	
List of jobs you held, duties performed, skills used or learned, a	advancements or promotions while you worked at this
company:	availed in promotions write you worked at this

Describe construction Experience:

### References: Include only individuals familiar with your work ability. Do not include relatives.

Name	Address/Phone	Years known/Relationship
1		
2		
3		

### PLEASE READ CAREFULLY

#### **APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by Tull Companies (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Tull Companies or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the owner of the Company. Both the undersigned and Tull Companies may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as wells as random and/or periodic testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I further understand that my employment with the Company shall be probationary for a period of thirty (30) days, and further, that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

<b>Signature of Applicant</b>	Date:	

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.



27055 S Tallgrass Ave Ste 1 Sioux Falls, SD. 57108 Phone: (605) 370-1755 Fax: (605) 271-2205

Info@tullcompanies.com

AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER