

RMC SURVEYING, LLC
EMPLOYMENT APPLICATION
 Equal Opportunity, Reasonable Accommodation Employer

Mailing Address:
 13621 HWY 110 S
 Tyler, Texas 75707

Name:			Date:		
Address:			City:	State:	Zip:
Home Phone:			Alternate Phone:		
Position Applied For:			E-mail Address:		
Have you ever applied here before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If Yes, when?		

EDUCATION RECORD

A copy of your high school diploma/GED certificate may be required at time of interview.

Did you graduate from high school or receive a GED certificate? yes no

SCHOOL NAME	LOCATION	HOURS EARNED	DIPLOMA, DEGREE OR CERTIFICATE EARNED	MAJOR FIELD OF STUDY
Business/Technical/Vocational		(Clock)		
1.				
2.				
Colleges/Universities		(Semester)		
1.				
2.				
Graduate Schools		(Semester)		
1.				
2.				

LICENSES (Optional, unless required for the position for which you are applying.)

Driver's License – "X" those that apply <input type="checkbox"/>	For positions which require specific licenses, copies of licenses will be required at the time of interview.
Operators: <input type="checkbox"/> C <input type="checkbox"/> M	List other current licenses, certifications, or registrations required for the position for which you are applying. Indicate types and dates received.
Commercial: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C Endorsements: <input type="checkbox"/> T <input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H <input type="checkbox"/> X	
Expiration Date? _____ Number: _____	

SPECIAL SKILLS/LANGUAGES

List any special skills you possess and/or equipment or office machines you can operate.

Languages (Other than English):	
1. <input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write	2. <input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write

OTHER INFORMATION

Have you been convicted of a crime or have you pled nolo contendere or been granted deferred adjudication within the last ten years? Yes No
 If yes, list all such offenses and state date, name of court and disposition. You may omit minor violations for which you paid a fine of \$50 or less.

EMPLOYMENT RECORD

Please list all employment or volunteer experience. Begin with your present or last position and work back. Provide sufficient, qualifying experience. Please explain all periods of unemployment exceeding 90 days. Additional Information Sheets are available if needed. **You may attach a resume reflecting your employment history in lieu of completing this portion of the application.**

May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Full-time <input type="checkbox"/>	Position Title: _____
Employer: _____		Part-time <input type="checkbox"/>	Ending Salary: _____
Address: _____			
City/State: _____			
_____	Months in this position: _____	Supervisor's Name: _____	
Start Date _____	End Date _____	Supervisor's Phone: _____	
Reason for Leaving: _____			
Describe responsibilities and duties you performed or skills you have that are required for the position for which you are applying. _____			

May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Full-time <input type="checkbox"/>	Position Title: _____
Employer: _____		Part-time <input type="checkbox"/>	Ending Salary: _____
Address: _____			
City/State: _____			
_____	Months in this position: _____	Supervisor's Name: _____	
Start Date _____	End Date _____	Supervisor's Phone: _____	
Reason for Leaving: _____			
Describe responsibilities and duties you performed or skills you have that are required for the position for which you are applying. _____			

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Employer: _____		Part-time <input type="checkbox"/>	Ending Salary: _____
Address: _____			
City/State: _____			
_____	Months in this position: _____	Supervisor's Name: _____	
Start Date _____	End Date _____	Supervisor's Phone: _____	
Reason for Leaving: _____			
Describe responsibilities and duties you performed or skills you have that are required for the position for which you are applying. _____			

EMPLOYMENT RECORD CONT.

May we contact this employer? Yes No

Employer: _____ Full-time Position Title: _____
Address: _____ Part-time Ending Salary: _____
City/State: _____

Start Date _____ End Date _____ Months in this position: _____ Supervisor's Name: _____
Reason for Leaving: _____ Supervisor's Phone: _____

Describe responsibilities and duties you performed or skills you have that are required for the position for which you are applying. _____

May we contact this employer? Yes No

Employer: _____ Full-time Position Title: _____
Address: _____ Part-time Ending Salary: _____
City/State: _____

Start Date _____ End Date _____ Months in this position: _____ Supervisor's Name: _____
Reason for Leaving: _____ Supervisor's Phone: _____

Describe responsibilities and duties you performed or skills you have that are required for the position for which you are applying. _____

I certify that I have made no misrepresentation in this application and I have not withheld information in my statements and answers to questions. I hereby authorize RMC Surveying, LLC to investigate and verify any representations made by me, either orally or in writing. I understand that RMC Surveying, LLC may use any service available to perform background checks for employment I understand that RMC Surveying, LLC may use resources to obtain verification of the information requested, completed or not completed by the applicant for the evaluation of possible employment. I hereby release RMC Surveying, and any individual who provides or obtains information pursuant to this authorization, from any and all liability for damages of any kind which may result to me on account of compliance, or attempts to comply, with this authorization. I am also aware that my application is subject to the Texas open records law and may be released as a public document. I also understand that this application is the property of RMC Surveying and will become a part of my personnel file if I am hired.

Signature of Applicant: _____ Date: _____

APPLICANT INFORMATION

EEO Data

The following information is requested for record keeping purposes. The information will not be used for making employment decisions and will be separated from your application.

PERSONAL DATA

Last Name	First Name	Middle Name	Social Security No.		
Address			City	State	Zip
Home Phone		Alternate Phone			
Sex <input type="checkbox"/> M – Male <input type="checkbox"/> F - Female		Date of Birth			
Ethnic Origin <input type="checkbox"/> 1-White <input type="checkbox"/> 2- Black <input type="checkbox"/> 3 – Hispanic <input type="checkbox"/> 4 – Asian/Islander <input type="checkbox"/> 5-Other					
How did you find out about this job? _____ _____ _____ _____ _____ _____ _____					

Signature of Applicant: _____ Date: _____