

FLOYD COUNTY SECONDARY ROADS

APPLICATION FOR EMPLOYMENT – Equipment Operator II

M - F / 7:00 a.m. to 3:30 p.m.

PLEASE PRINT

Name: _____	Are you over 18 years of age: Yes / No
Address: _____	Telephone No. _____
City, State, Zip: _____	Drivers License No. _____

Military Service Branch: _____	No. of yrs? _____
Do you wish to claim veteran's preference? Yes No	
Do you have relatives employed by Floyd County: Yes / No	
If yes, list names and relationship _____	
Are you legally eligible for employment in the U.S.A.: Yes / No (If yes, verification will be required prior to employment offer.)	

Do you have an Iowa Drivers License: Yes / No
Do you have a Commercial Drivers License: Yes / No If yes, Class _____

EDUCATION

Education: Number of years completed _____	Do you have a Diploma or GED: _____
High School Name/Location: _____	
College Name/Location: _____	
Other Training or Apprenticeships or Licenses: _____	

MEDICAL

Most Recent Physical Examination Date: _____
Results: _____

EXPERIENCE

Check the following equipment that you have experience in operating and indicate the estimated number of hours spent on the equipment:

Motorgrader _____
Hours experience _____

Crawler/Loader _____
Hours experience _____

Wheel Loader _____
Hours experience _____

Dump Truck _____
Hours experience _____

Crawler/Dozer _____
Hours experience _____

Snowplow _____
Hours experience _____

Semi-Truck _____
Hours experience _____

Tractor _____
Hours experience _____

Hydraulic Excavator _____
Hours experience _____

Backhoe _____
Hours experience _____

Fork Lift _____
Hours experience _____

Crane: Hydraulic _____
Lattice Boom _____
Hours experience _____

PREVIOUS EMPLOYMENT (start with most recent)

Dates: From _____ to _____	Employer: _____ Duties: _____
Dates: From _____ to _____	Employer: _____ Duties: _____
Dates: From _____ to _____	Employer: _____ Duties: _____

REFERENCES

- Name _____ Relationship _____
Address _____ Phone _____
- Name _____ Relationship _____
Address _____ Phone _____
- Name _____ Relationship _____
Address _____ Phone _____

I hereby represent that each answer to a question herein and all other information otherwise furnished is true and correct. I further represent that such answers and information constitute a full and complete disclosure of my knowledge with respect to the question or subject to which the answer or information relates. I understand that any incorrect, incomplete, or false statements or information furnished by me will subject me to discharge at any time. In the event that I am employed by Floyd County, I agree to comply with all of its orders, rules, and regulations. I hereby authorize my former employers to give any information regarding my employment with them and, in addition, to furnish any other information they may have concerning me.

Signature: _____ Date: _____