

H2O UNDERPRESSURE, INC

APPLICATION FOR EMPLOYMENT

N892 Depot Road
Dale, WI 54931

Applicant Name _____ Date Applied _____

Address _____ City _____

State _____ Zip _____ Date of birth _____

SS# _____ Position applied for _____

Home Phone _____ Emergency Contact _____

Wage you are looking for _____ Phone # _____

Supply all addresses for past 3 years:

Previous Address(s)		
City	State	Zip
Previous Address(s)		
City	State	Zip
Previous Address		
City	State	Zip

Driver license Information: Do you hold a valid CDL? Yes No

License #	State Issued	Expiration date
-----------	--------------	-----------------

Driving Experience: Circle types of Equipment

DUMP	TANK	FLAT	REFER	VAN
YRS AND MILES				

Have you ever been denied a license, permit, or privilege to operate a motor vehicle?

Yes No If yes, give details _____

Has your license, permit or privilege ever been suspended or revoked? Yes No If yes, give details _____

Accident Record for past three years or more (attach addition sheet if more space is needed) If none write "none".

Dates	Nature of accident	Fatalities	Injuries	Hazardous Spill
Last accident 1st				

H2O UNDERPRESSURE, INC APPLICATION FOR EMPLOYMENT

N892 Depot Road
Dale, WI 54931

--	--	--	--

Traffic Convictions and forfeitures for the past three years (other than parking violations) If none write "none".

Location	Date	Charges	Penalty

Employment History

CDL drivers must provide the employers for the past 10 years, all other applicants must provide at least the last 3 years. You must provide complete mailing address and phone number.

Employer	Date	
Name	From (month/year)	To (month/year)
Address	Position Held	
City State Zip	Salary/Wage	
Contact Person Phone #	Reason for leaving	

Were you subject to the FMCSR While employed? Yes No

Employer	Date	
Name	From (month/year)	To (month/year)
Address	Position Held	
City State Zip	Salary/Wage	
Contact Person Phone #	Reason for leaving	

Were you subject to the FMCSR While employed? Yes No

Employer	Date	
Name	From (month/year)	To (month/year)
Address	Position Held	
City State Zip	Salary/Wage	
Contact Person Phone #	Reason for leaving	

Were you subject to the FMCSR While employed? Yes No

If you need additional room attach another sheet.

Do you have any pre-existing medical concerns that would hinder your performance of job requirements? (ie. Physically demanding work, Confined Space, Driving, Respirator use, heights, etc...)

H2O UNDERPRESSURE, INC APPLICATION FOR EMPLOYMENT

N892 Depot Road
Dale, WI 54931

Yes

No

Circle highest grade completed: 1 2 3 4 5 6 7 8 High School 9 10 11 12 College 1 2 3 4

Name and Address of Schools you attended:

H2O Underpressure Inc. is an equal opportunity employer, qualified applicants are considered for all positions without regard to age, race, color, religion, sex, national origin, marital status, veteran status, sexual orientation or preference, or any other protected group status.

To be read and signed by applicant

I authorize you to make such investigations and inquires of my personal, employment or medical history and other related matters as may be necessary in arriving at an employment decision. (Generally inquires regarding medical history will be made on, if and after a conditional offer of employment has been extended.) I hereby release employers, schools, healthcare providers and other persons from all liability in responding to inquires and releasing information in connection with my application.

In the event of employment, I understand that false or misleading information anywhere on this application or given during interview(s) may result in discharge. I also understand I am to abide by all rules and regulations of the Company.

I understand that information I provided regarding current and/or previous employers may be used, and those employers will be contacted, for the purpose of investigating my safety performance history as required by 49CFR 391.23 (d) and (e). I understand I have the right to:

- * Review Information provide by previous employers.
- * To have previous employers re-sent corrected information to prospective employer.
- * If my previous employer and I cannot agree on the accuracy of the information a can attach a statement of dispute.

Signature: _____ Date _____

I understand that nothing in the employment application, the granting of an interview and/or my subsequent employment with the company is intended to create an employment contract between the Company and myself. My signature on this application certifies that I completed this application, and all information contained is true and complete to the best of my knowledge.

Signature: _____ Date _____

For Company Use

Process Record	
Applicant hired _____	Rejected _____
Department _____	Position _____
Signature of interviewing officer _____	
Termination of Employment	

**H2O UNDERPRESSURE, INC
APPLICATION FOR EMPLOYMENT**

N892 Depot Road
Dale, WI 54931

Date Terminated _____ Dismissed Quit Other