



Trap Rock Industries, LLC
P.O. Box 419
Kingston, NJ 08528
609-924-0300



Application For Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status. Applicants requiring accommodations for the application and/or interview process should notify Human Resources.

(PLEASE PRINT)

Position Applied For		Salary Requirement	Date of Application	
Last Name		Middle Name	First Name	
Address		City	State	Zip Code
Telephone Number	Email			
How Did You Learn About Us?				
Advertisement	Friend	Walk-in		
Employment Agency	Relative	Other _____		

Are you 18 years of age or older? Yes No

Have you ever filed an application with us before? Yes No

If Yes, give date(s) _____

Position(s) _____

Have you ever been employed with us before? Yes No

If Yes, give date(s) _____ To _____

Position(s) _____

Are you currently employed? Yes No

Are you authorized to work in the U.S.? Yes No

Proof of citizenship or immigration status will be required upon employment.

Date available to start work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Can you work overtime if required? Yes No

If No, give details: _____

Can you travel if a job requires it? Yes No

If No, give details: _____

Education



	High School	Undergraduate College / University	Graduate / Professional
School Name and Location			
Number of Years Completed			
Diploma / Degree			
Describe any specialized training, apprenticeship, skills and extra-curricular activities			
Describe any honors you have received			
State any additional information you feel may be helpful to us in considering your application			

Indicate any foreign languages you can speak, read and / or write

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

List professional, trade, business or civic activities and offices held.

You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:

References

Give name, email and telephone number of three references who are not related to you and are not previous employers.

Name	Relationship to you	Telephone	Email

Are you able to perform the essential functions of the job for which you are applying?

Yes No
Need more info to respond

Have you ever had any job-related training in the United States military?

Yes No

If Yes, please describe _____

Employment Experience



Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap, or other protected status.

1.	Employer	Dates Employed		Reason for Leaving
		From	To	
	Address			
	Job Title	Supervisor	May we contact for reference	
	Work Performed		Yes	No
				Later
			Email: _____	
			Phone: _____	
2.	Employer	Dates Employed		Reason for Leaving
		From	To	
	Address			
	Job Title	Supervisor	May we contact for reference	
	Work Performed		Yes	No
				Later
			Email: _____	
			Phone: _____	
3.	Employer	Dates Employed		Reason for Leaving
		From	To	
	Address			
	Job Title	Supervisor	May we contact for reference	
	Work Performed		Yes	No
				Later
			Email: _____	
			Phone: _____	

Explain gaps in your employment excluding any due to illness, or injury.

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience. Please include licenses and certifications.

Applicant's Statement



I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered active for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “*at will*” nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this “*at will*” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

I understand that if I am hired, I will be required to complete an I-9 form to provide proof of identity and legal authorization to work in the United States.

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

I further understand that as per company policy, all prospective employees must submit to a controlled substances test when a job offer is extended.

Signature of Applicant

Date

Notes
