



Application for Employment

Please Print or Type

Crews Control, LLC. is an Equal Opportunity Employer and does not discriminate against any applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital, genetic information or veteran status, sexual orientation or any other characteristic protected by law.

Date of Application: _____ / _____ / _____

Name: _____
Last
First
Middle Initial

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Email Address: _____

Are you 18 years of age or older? Yes No

Are you a Veteran of the Armed Forces? Yes No

Do you have a current valid driver's license? Yes No

Do you have reliable transportation? Yes No

If hired, can you provide documents required ESTABLISHING your eligibility to work in the US? Yes No

Have you ever been convicted of, or pled guilty or no contest to, a crime other than a minor traffic accident? Yes No

If yes, please explain in detail on a separate piece of paper and include the date of final disposition of the case and the nature of the offense. This information will not necessarily disqualify you from employment but false or misleading information will. Factors such as age and time of offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

Employment Desired

Traffic Control	Office	Other				
Full-Time	Part-Time	Temporary	Seasonal			
Date Available for Work _____			Are you currently employed?		Yes	No
Do you belong to a Union? _____			If YES, Local # _____			
Pay Desired? _____			Hourly	Weekly	Monthly	Annually
Are you willing to travel more than 2 hours (one way) to work?				Yes	No	
Available all shifts?	Yes	No	Weekends?	Yes	No	

Equal Opportunity Employer



Education

High School or last grade attended

Name of School: _____

Location: _____ Subjects Studied: _____

Number of Years Attended: _____ Did you graduate: _____

College

Name of School: _____

Location: _____ Subjects Studied: _____

Number of Years Attended: _____ Did you graduate: _____

Trade, Business or Correspondence School

Name of School: _____

Location: _____ Subjects Studied: _____

Number of Years Attended: _____ Did you graduate: _____

Subjects of Special Study or Research Work: _____

Specialized Training and/or Certification(s): _____

**** Please attach copies of all certifications and submit with application ****

