



Please fill out the following form completely and attach in an email to: [careers@hdrtractors.com](mailto:careers@hdrtractors.com).

### APPLICANT INFORMATION

Name and contact fields are required.

First Name

Middle Name

Last Name

Address (Including City/State/Zip)

Telephone

Email

Date of Birth

Do you have a current Kentucky driver's license?

Yes  No

Are you 18 years of age?

Yes  No

Are you currently employed?

Yes  No

Do you have any physical defects which preclude you from performing certain jobs?

Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (Proof of Citizenship or Immigration status will be required upon employment.)<sup>1</sup>

Yes  No

Do you have a current CDL license?

Yes  No

May we contact your present employer?

Yes  No

Are you available to work

Full-Time  Part-Time

Can you travel if a job requires it?

Yes  No

Are you currently on lay-off status and subject to recall?

Yes  No

If YES, explain.

Have you been convicted of a felony within the last 7 years? (Conviction will not necessarily disqualify an applicant for employment.)

Yes  No

Have you received Workman's Compensation or Disability Income payments?

Yes  No

If YES, explain.

## WORK AVAILABILITY & REQUIREMENTS

How were you referred (specify newspaper name, website/career link, staffing agency, etc.)?

Date Available

Position Applying For

Expected Wage (hr or year)

## EDUCATION

High School Name

High School City

High School State

Did you graduate?

Yes  No

College Name

College City

College State

Did you graduate?

Yes  No

Degree/Diploma

Other School Name

Other School City

Other School State

Did you graduate?

Yes  No

Degree/Diploma

Summarize special job-related skills / qualifications acquired from employment or other experience.

State any additional information you feel may be helpful to us in considering your application.

*Note to Applicants:* DO NOT ANSWER THESE QUESTIONS UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without accomodation, the activities involved in the job or occupation for which you have applied?

Yes  No

<sup>1</sup> Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity (i.e. valid driver's license, birth certificate, green card, etc.) within (3) days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

## REFERENCES

List three (3) non-relatives who are familiar with your qualifications, work history, and ability.

Name	Relationship	Years Known	Telephone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## MILITARY EXPERIENCE

Branch	Date From	Date To	Rank at Discharge
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Type of discharge	If other than honorable, explain		
<input type="text"/>	<input type="text"/>		

## EMPLOYMENT EXPERIENCE

Start with your present or last job. List your last four (4) jobs in order. Do not omit any job.

Employer	Your Position	Telephone
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	Employment Duration	Salary (starting / ending)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Work Performed or Duties		
<input type="text"/>		
Reason for Leaving		
<input type="text"/>		

May we contact your supervisor?

Yes  No

Supervisor Name

## Employer #2

Employer

Your Position

Telephone

Address

Employment Duration

Salary (starting / ending)

Work Performed or Duties

Reason for Leaving

May we contact your supervisor?

Yes  No

Supervisor Name

## Employer #3

Employer

Your Position

Telephone

Address

Employment Duration

Salary (starting / ending)

Work Performed or Duties

Reason for Leaving

May we contact your supervisor?

Yes  No

Supervisor Name

## Employer #4

Employer

Your Position

Telephone

Address

Employment Duration

Salary (starting / ending)

Work Performed or Duties

Reason for Leaving

May we contact your supervisor?

Yes  No

Supervisor Name

## DISCLAIMER AND SIGNATURE

**PLEASE READ THE FOLLOWING STATEMENT CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THIS APPLICATION FOR EMPLOYMENT, PLEASE ASK THEM PRIOR TO SIGNING.**

I certify that all answers and statements I have made on this application (and resume and other supplemental materials) are true and complete without omissions. I understand that any false information will result in refusal to hire or immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications.

Yes  No

If hired, I will be responsible for familiarizing myself with all the rules and regulations of Hobdy, Dye, & Read, Inc. as they presently exist are later modified. If hired, I understand employment can be terminated, at the discretion of the company or at my option, without notice, at any time, except as specifically set forth in writing in a current individual employment agreement, which I have entered into with the company.

Yes  No

I also understand that no representative of Hobdy, Dye, & Read, Inc. has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits or terms and conditions of employment, except as specifically stated in a current written agreement signed by the Owner/General Manager.

Yes  No

I understand this application is not an offer of employment and no promises or representations of employment have been made to me at this time.

Yes  No

By signing below, I authorize Hobdy, Dye, & Read, Inc. to investigate all statements contained in this employment application as they may deem necessary in arriving at an employment decision. I further authorize Hobdy, Dye, & Read, Inc. to order one or more consumer reports containing financial, driving record, and/or other information about me from a consumer reporting agency. I understand that the consumer report(s) will be requested and used for the purpose of evaluating me for employment, promotions, transfers, and/or retention as an employee.

Yes  No

E-Signature

Date

The application is valid for only ninety (90) days from the date I signed. If I want to be considered for job openings more than ninety (90) days from the date signed, I will submit a new application.