



Aquatic Resource Restoration Company  
 12506 Susquehanna Trail South  
 New Freedom, PA 17349  
 717.428.9368 • www.ARRRC1.com

**-CONFIDENTIAL-**

PRE-EMPLOYMENT QUESTIONNAIRE  
 EQUAL OPPORTUNITY EMPLOYER

# APPLICATION FOR EMPLOYMENT

## Section 1: Instructions

**PLEASE ANSWER ALL QUESTIONS.** Resumes **are not** accepted in lieu of completion of this application, but are encouraged to be included in addition. Note: This document was designed to use with several types of positions. Some questions may not be completely applicable to the job/position you are seeking; however, we ask that you fully complete all areas of

## Section 2: Applicant Information

**LAST 4 of SSN:** \_\_\_\_\_

Position(s) applying for \_\_\_\_\_ Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_

\_\_\_\_\_ Last & Suffix First Middle Other

Address: \_\_\_\_\_

\_\_\_\_\_ Street City State Zip

Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Are you under the age of 18?  Yes  No (**NOTE:** If yes, you may be required to furnish proof of exemption or partial waiver as detailed by Commonwealth of PA Child Labor Laws.)

Have you previously filed an application with this company?  Yes  No If yes, give date(s): \_\_\_\_\_

Have you previously been employed by this company?  Yes  No If yes, give date(s): \_\_\_\_\_

Please list any relatives or friends who are employed at this work site and their relationship to you \_\_\_\_\_

Do you have the legal right to work in the United States?  Yes  No Date available for work: \_\_\_\_\_

(**NOTE:** You will be required to provide appropriate document(s) for completion of the I-9 at the time of employment)

Type of employment desired:  Full-time  Part-time  Temporary  Seasonal  Educational Co-op

Do you have a reliable means of transportation (which will enable you to be at work as required)?  Yes  No

Will you work overtime if asked?  Yes  No

If required, are you able to work evenings?  Yes  No

If required, are you available to travel?  Yes  No

Are there any hours, shift or day you will not work?  Yes  No If yes, explain: \_\_\_\_\_

## Section 3: Skills & Qualifications

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying. \_\_\_\_\_

Other Languages: (Please indicate if read, written or spoken.) \_\_\_\_\_

**Driver's License:** Do you have a valid driver's license?  Yes  No If no, explain why: \_\_\_\_\_

If yes, Driver's License #: \_\_\_\_\_ (Class: A B C D E) State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Is your license suspended or pending suspension?  Yes  No If yes, explain why: \_\_\_\_\_



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### Section 4: Education Data

| School                               | Print Name, City, & State of Each School | No. of Years Completed | Degree | Major Course of Study |
|--------------------------------------|--|------------------------|--------|-----------------------|
| High School                          |  |                        |        |                       |
|                                      |  |                        |        |                       |
|                                      |  |                        |        |                       |
| College                              |  |                        |        |                       |
|                                      |  |                        |        |                       |
|                                      |  |                        |        |                       |
| Graduate School                      |  |                        |        |                       |
|                                      |  |                        |        |                       |
|                                      |  |                        |        |                       |
| Trade, Bus., Night or Correspondence |  |                        |        |                       |
|                                      |  |                        |        |                       |
|                                      |  |                        |        |                       |

Honors received: \_\_\_\_\_

### Section 5: References - Three (3) individuals, not relatives, whom you have known at least one (1) year.

| First Name, Last Name, City & State | Telephone | Years Known |
|-------------------------------------|-----------|-------------|
|                                     |           |             |
|                                     |           |             |
|                                     |           |             |

### Section 6: Employment Experience - LIST YOUR LAST FOUR (4) PREVIOUS EMPLOYERS (most recent first). Account for all the time periods including unemployment, self-employment & military service. This section must be completed in full in addition to any attached resume.

|                            |                        |    |                      |
|----------------------------|------------------------|----|----------------------|
| Employer                   | Dates Employed<br>From | To | Immediate Supervisor |
| Address                    |                        |    | Telephone Number     |
| Job Title & Work Performed |                        |    |                      |
| Reason For Leaving         |                        |    |                      |



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## APPLICATION FOR EMPLOYMENT

### Section 6: Employment Experience (continued)

|                            |                        |    |                      |
|----------------------------|------------------------|----|----------------------|
| Employer                   | Dates Employed<br>From | To | Immediate Supervisor |
| Address                    |                        |    | Telephone Number     |
| Job Title & Work Performed |                        |    |                      |
| Reason For Leaving         |                        |    |                      |

|                            |                        |    |                      |
|----------------------------|------------------------|----|----------------------|
| Employer                   | Dates Employed<br>From | To | Immediate Supervisor |
| Address                    |                        |    | Telephone Number     |
| Job Title & Work Performed |                        |    |                      |
| Reason For Leaving         |                        |    |                      |

|                            |                        |    |                      |
|----------------------------|------------------------|----|----------------------|
| Employer                   | Dates Employed<br>From | To | Immediate Supervisor |
| Address                    |                        |    | Telephone Number     |
| Job Title & Work Performed |                        |    |                      |
| Reason For Leaving         |                        |    |                      |

|                            |                        |    |                      |
|----------------------------|------------------------|----|----------------------|
| Employer                   | Dates Employed<br>From | To | Immediate Supervisor |
| Address                    |                        |    | Telephone Number     |
| Job Title & Work Performed |                        |    |                      |
| Reason For Leaving         |                        |    |                      |

Please provide an explanation for any lapse of employment: \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been dismissed or forced to resign from an employment?  Yes  No If yes, explain why: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



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### APPLICANT'S STATEMENT, AUTHORIZATION AND RELEASE

By submitting this application or other documents, I agree to conform to the rules and regulations of the Company, including an Probationary Period (if applicable). I certify that the information provided in this Application for Employment is correct and complete. I authorize the investigation of this information and give permission for Aquatic Resource Restoration Company, or their designated representatives to contact schools, previous employers, personal references and others to verify the data I have supplied. I release and indemnify Aquatic Resource Restoration Company from any claims or liability resulting from such inquiries. In addition, I release the schools, my previous employers, and other individuals from all liability as a result of responding to such inquiries. I understand that my misrepresentation, omission of fact(s), or incomplete information may disqualify me for employment with Aquatic Resource Restoration Company. In addition, if I am employed by Aquatic Resource Restoration Company, any discovery of misrepresentation or omission of fact(s) on this Application for Employment following my employment may result in discipline up to and including termination.

I understand and agree as a condition of continued employment that I will be required to take a drug and/or alcohol test as part of any work related accident investigation.

I understand that employment with Aquatic Resource Restoration Company is for no guaranteed period of time and may be terminated by myself or the Company with or without notice. I acknowledge that any promise, policies, business practices, procedures, or documents (including the Company's Employee Handbook) do not constitute an employment contract or modification of the at-will employment relationship between Aquatic Resource Restoration Company and myself.

• **Note:** Complete details of ARRC's Drug Free Workplace Policy will be provided during the interview process.

### STATEMENT

Aquatic Resource Restoration Company complies with the Americans with Disabilities Act of 1990. During the interview process, you may be asked questions regarding your ability to perform job-related responsibilities. If Aquatic Resource Restoration Company extends an offer of employment to you, you may be required to complete a post-job offer medical history questionnaire and/or undergo a medical examination or drug screening.

Aquatic Resource Restoration Company is an equal employment opportunity employer. It is Aquatic Resource Restoration Company's policy to make employment decisions without regard to race, color, religion, sex, age, national origin, disability, sexual orientation, marital status or any other protected category.

Applicants who are accepted for employment with Aquatic Resource Restoration Company should understand that while every effort is made to provide continuous work, there are no employment contracts and the permanency of any position is not guaranteed.

### FAIR CREDIT REPORTING ACT NOTIFICATION

You are notified that in connection with your application for employment (including contract for services) and/or active employment with Aquatic Resource Restoration Company, a consumer report and/or investigative report which may contain public record information may be requested and/or made on you. This report may include consumer credit, driving records, education history, prior employer verification and other information for the purpose of considering you for employment, promotion, reassignment or retention with Aquatic Resource Restoration Company.

These reports may include information regarding your career experience along with reasons for termination of past employment, information regarding your character, reputation, personal characteristics and/or mode of living and will be obtained from public or private record sources or through personal interviews.

Before a consumer and/or investigative report is requested, you will be asked to complete a Disclosure and Consent form. You will be provided the name and address of the consumer-reporting agency to which the request for information is being made. You will have the right to a complete disclosure of the nature and scope of the investigation and a written summary of your rights under the Fair Credit Reporting Act.

### APPLICANT SIGNATURE:

Signature \_\_\_\_\_

Date: \_\_\_\_\_