

# Baker Septic Installations, Inc.

Serving With Pride Since 1947

## APPLICATION FOR EMPLOYMENT

7740 South George Boulevard

Sebring, FL 33875

Ph (863) 385-0917 Fax (863) 385-4553

Email: bseptic@embarqmail.net

### POSITION DESIRED

#### Office

(a) \_\_\_\_\_ Clerical/Secretarial

(b) \_\_\_\_\_ Accounting/Bookkeeping

#### Construction (\*Class A Driver License Preferred for All Construction Positions)

##### Check All Of Interest to You

(c) \_\_\_\_\_ Septic Installation Supervisor

(h) \_\_\_\_\_ Portable Restroom Assistant

(d) \_\_\_\_\_ Septic Installer Assistant

(i) \_\_\_\_\_ Yard Supervisor

(e) \_\_\_\_\_ Septic Service Supervisor

(j) \_\_\_\_\_ Concrete Production Supervisor

(f) \_\_\_\_\_ Septic Service Assistant

(k) \_\_\_\_\_ Concrete Production Assistant

(g) \_\_\_\_\_ Portable Restroom Supervisor

(l) \_\_\_\_\_ Concrete Product Delivery Assistant

### PERSONAL INFORMATION: PLEASE PRINT.

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Home Address: Street Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Mailing Address: Street/PO \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone Numbers: (include area code for all numbers)

Home: \_\_\_\_\_

Cell: \_\_\_\_\_

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

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Address: (City, State, ZIP) \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Are you presently employed? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, Employer's Name: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Address of Business: \_\_\_\_\_

Phone Number: \_\_\_\_\_

If no, reason for ending employment \_\_\_\_\_

May we contact your current employer? Yes \_\_\_\_\_ No \_\_\_\_\_

**Employment Information: List your last three employers starting with current employment.**

Dates Employed Mo/Year	Position Held	Name and Address of Business/Employer (Include city, state, ZIP)	Name of Immediate Supervisor	Phone Number of Business (Include area code)	Reason Left
1.					
2.					
3.					

**Education/Training Information: Please respond to each question.**

- Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12
- Are you 18 years of age or older? Yes\_\_\_\_\_ No\_\_\_\_\_
- Do you have a high school diploma or GED? Yes\_\_\_\_\_ No\_\_\_\_\_
- Do you have any education/training beyond high school? Yes\_\_\_\_\_ No\_\_\_\_\_
 

If yes, where did you attend school/training and describe the program/training you have completed. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_
- Do you plan to pursue other education or training? Yes\_\_\_\_\_ No\_\_\_\_\_
 

If yes, what type and when? \_\_\_\_\_

\_\_\_\_\_

**LICENSES/EQUIPMENT:**

Do you have a Florida Commercial Driver's License (CDL)? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, type held: Class A\_\_\_\_\_ Class B\_\_\_\_\_

Driver's License Number: \_\_\_\_\_

State Held: \_\_\_\_\_

Check the type of vehicles you are qualified to drive:

Light trucks\_\_\_\_\_ Heavy trucks\_\_\_\_\_ Buses\_\_\_\_\_ Tractors\_\_\_\_\_ Commercial Vans\_\_\_\_\_

Other\_\_\_\_\_

List the type of heavy equipment or other construction equipment/tools you can operate: \_\_\_\_\_

\_\_\_\_\_

List the type of office equipment, machines, programs you can operate or have training/experience to use: \_\_\_\_\_

\_\_\_\_\_

