Date: THE DICKERSON GROUP, INC. APPLICATION FOR EMPLOYMENT Social Security # _____-NAME First, Middle Last, ____) ____ Mailing Address_____ Street City State Zip Area Code Telephone Permanent Resident Date of Birth _____ Are you a Citizen Naturalized Are you currently active Duty or discharged from the United States Armed Forces ? Active Discharged Do you have a valid Georgia Drivers License? Yes No License #_____ Do you have a valid CDL Yes No If yes, what class Have you ever been convicted of a felony or misdemeanor? Yes No If yes, please explain: Which position are you applying for? Part Time Summer Temporary Date available for work Full Time Can you be on **time**? Yes No Are you willing to work hours other than 8-5? Yes No Are you willing to respond to emergency calls on weekends? Yes No Are you union? Yes No Education: Circle Highest Grade Completed 1 2 3 4 5 6 7 8 9 10 11 12 / Did you graduate/achieve GED? Yes No Name and Location of School Hours Graduated Expected Type of Diploma or Major/Minor Field of Tupe of

School	Name and Location of School	Tiours	Yes/No	Graduation Date	Degree	Study
Undergraduate Colleges or						
Universities						
Graduate Schools						
Technical, Vocational or Business						
Schools						

Which type of equipment can you operate?320 ExcavatorTandum Dump TruckSewer Jetter						
TB 145 Excavator Boring Machine	Loader Single Axel Dum		Welder			
Please list any other equ	ipment that is not listed	l above:				
Do you have experience	e with piping? Yes		• •	years of experience and what	type:	
Please list any licenses	that you currently hold:					
Do you have any previo	ous or existing injuries?	Yes	No	If yes, please explain:		
Previous Employment	: Start with your present job	o or last job. N	IAY WE CONTACT	PREVIOUS EMPLOYER: YES	NO	
From:	To:		Phone #:			
Company Name:		Su	pervisor:			
Job Duties:					-	
From:	To:		Phone #:		_	
Company Name:		Su	pervisor:			
Job Duties:					-	
From:	To:		Phone #:		_	
Company Name:		Su	pervisor:			
Job Duties:					-	
From:	To:		Phone #:		-	
Company Name:	Name:Supervisor:					
Job Duties:					-	

Personal References (Non- related):	
Name:	Years acquainted:
Address:	
Name:	Years acquainted:
Address:	Phone #
For Office Use Only	

Interviewed by _____

Date _____