

# E.T. GRESHAM COMPANY, Inc.

P.O. BOX 1077 – NORFOLK – VIRGINIA - 23501

## EMPLOYMENT APPLICATION

E.T. Gresham Company is an equal opportunity employer. As such, we provide employment opportunities without regard to race, color, religion, national origin, gender, age, disability, veteran status, military service, or other characteristics protected by law.

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Position Applied For: \_\_\_\_\_ Rate of pay expected \$ \_\_\_\_\_ per week

\*\*Please attach Resume if possible\*\*

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

Current Address: \_\_\_\_\_  
Street (include house, apt, number, etc) City State Zip

Telephone E-mail  
Number: (\_\_\_\_) \_\_\_\_\_ Address \_\_\_\_\_

Are you at least 18 years old? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you authorized to work in the U.S.? \_\_\_\_\_ Yes \_\_\_\_\_ No

Date you can start work: \_\_\_\_\_ Position desired: \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time

Have you applied for employment with the company before? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, when? \_\_\_\_\_  
Date Position

Have you ever worked for the company before? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so: \_\_\_\_\_  
Date Position

Are you related (by blood, marriage, or law) to anyone who works for the company?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

If so: \_\_\_\_\_  
Name Position

Have you ever been involuntarily terminated or asked to resign from employment?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If so, give the name of the employer, dates of employment, position held, name of supervisor, and reason for termination/ resignation request:

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been counseled, disciplined, terminated or asked to resign as a result of reported workplace harassment, fighting/assault, violation of safety rules, or other inappropriate condition?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If so, give the name of the employer, date and description of incident:

\_\_\_\_\_  
\_\_\_\_\_

List your most recent employment history, including military service, starting with your present status. All periods of unemployment must be identified as "Unemployed" and dates of unemployment identified. Do not leave gaps in time.

Name of employer: \_\_\_\_\_ Position(s) held, salary, supervisor and dates:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address/phone number of location where  
You worked: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

\_\_\_\_\_

Name of employer: \_\_\_\_\_ Position(s) held, salary, supervisor and dates:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address/phone number of location where  
You worked: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

\_\_\_\_\_

Name of employer: \_\_\_\_\_ Position(s) held, salary, supervisor and dates:  
\_\_\_\_\_  
\_\_\_\_\_

Address/phone number of location where  
You worked: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

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**EDUCATION**

	Name and Location	Years Completed	Did You Graduate?	Degree
High School	_____	9, 10, 11, 12	__Yes __No	
College	_____	Fr So Jr Sr	__Yes __No	_____
Trade School	_____		__Yes __No	_____
Graduate School	_____		__Yes __No	_____

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**REFERENCES**

(List 3. Do not list relatives, domestic partners, or former employers.)

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Complete Address: \_\_\_\_\_  
Phone number: (\_\_\_\_) \_\_\_\_\_ Dates known: \_\_\_\_\_

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Complete Address: \_\_\_\_\_  
Phone number: (\_\_\_\_) \_\_\_\_\_ Dates known: \_\_\_\_\_

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Complete Address: \_\_\_\_\_  
Phone number: (\_\_\_\_) \_\_\_\_\_ Dates known: \_\_\_\_\_

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CRIMINAL HISTORY

Have you ever been convicted of (or pleaded guilty or no contest or paid a fine for) ANY criminal offense of ANY type whatsoever (this includes but is not limited to felonies, misdemeanors, DWI, hunting offenses, domestic violence, city or county ordinances)? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, list all offense(s), date(s) of conviction/plea, county/city/state of conviction:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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PROFESSIONAL CERTIFICATIONS

List all professional licenses, certifications, etc. that may be related to the position you are applying for and list the dates issued and name of the organization granting the license, certification, etc.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List and describe any special skills, second languages, or other training you have that may be related to your employment.

\_\_\_\_\_  
\_\_\_\_\_

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IMPORTANT INFORMATION

The facts set forth above in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. E.T. Gresham Company is hereby authorized to make any investigation of my personal history and financial and credit record through investigative or credit agencies or bureaus of their choice.

There is rarely a contractual relationship between the Company and an employee. Unless such a written contract exists, each employee is considered and Employee-At-Will. Employee-At-Will means the Company reserves the right to terminate the employee's relationship with the Company at any time for any or no reason.

In making this application for employment I also understand that an investigative consumer report may be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry includes information as to my general character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigative consumer report.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

DRIVING HISTORY

IF THE POSITION YOU SEEK REQUIRES YOU TO DRIVE A VEHICLE, PLEASE ANSWER THE FOLLOWING QUESTIONS.

Do you have a valid driver's license? \_\_\_\_\_YES \_\_\_\_\_No

If yes, list state, number, and expiration date: \_\_\_\_\_

List all states from which you have held a driver's license and dates held \_\_\_\_\_

Has your driver's license, permit, or privileges ever been suspended, revoked, or cancelled? \_\_\_\_\_ Yes \_\_\_\_\_No

If so, list state(s), date(s), and reason(s): \_\_\_\_\_

Have you ever been denied a driver's license, permit, or privilege to drive by a government agency or employer? \_\_\_\_\_Yes \_\_\_\_\_No

If yes, list state(s), government agency(ies)/ employer(s), and reason(s): \_\_\_\_\_

In the last 3 years, have you ever been charged with any traffic-related offenses? \_\_\_\_\_Yes \_\_\_\_\_No

If yes, list all offense(s), date(s), location(s), and result(s): \_\_\_\_\_

IF THE POSITION YOU SEEK REQUIRES YOU TO OPERATE A COMMERCIAL MOTOR VEHICLE, PLEASE ANSWER THE FOLLOWING QUESTIONS.

Name of employers for whom you operated a commercial motor vehicle during the past 10 years:

Note: Be sure that these employers, addresses, dates of employment, and reasons for leaving are identified in the employment history section of the application.

During the previous two years, have you:

- 1) Had an alcohol test result of 0.04 alcohol concentration or greater? \_\_\_\_\_Yes \_\_\_\_\_No
2) Had a verified positive controlled substance test result? \_\_\_\_\_Yes \_\_\_\_\_No
3) Refused to take an alcohol or drug test? \_\_\_\_\_Yes \_\_\_\_\_No