Hire Date_		
	Office use only	



5287 Airport Rd. Mt. Croghan, SC 29727 843 672 5555

EMPLOYMENT APPLICATION

Please Complete the Entire Application and return to accounting@bundrickrail.com

OUT OF TOWN ACKNOWLEGEMENT

I agree to work out of town for up to 10 days at a time as part of employment. \Box Yes \Box No

Out of town lodging/meals paid for by Company.

It is the policy of Bundrick Rail Services, LLC. to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

1. Applicant Information		
Applicant Full Name:	Daytime phone:	
Home Address:	Evening phone:	
City/State/ZIP:	Date of Birth:	
Number of years at this address	s:	
Email Address:		
Social Security Number: (leave blank until hired)		
Driver's License (State/Numbe	r):	
2. Emergency Contact	Who should be contacted if you are involved in an emergency?	
Contact Name:	ontact Name: Relationship to you:	
Address:	City/State/ZIP:	
Daytime phone:	Evening phone:	
 Job Position Applied Fo 	r: Full or Part Time?	

4.	Salary Desired: \$ per	
	Do you have any friends or relatives who work here? If yes, please list here:	
5.	Are you at least 18 years old? Yes No	
6.	How will you get to work?	
7.	Are you willing to work any shift, including nights and weekends? Yes No If no, please state any limitations:	
8.	If applicable, are you available to work overtime? Yes No	
9.	If you are offered employment, when would you be available to begin work?	
10.	If hired, are you able to submit proof that you are legally eligible for employment in the United States? Yes No	
11.	Applicant's Skills	
-	Ability Skill Years of Experience Rating 1 2 3 4 5 1 2 3 4 5 1 2 3 4 5 1 2 3 4 5	
servi	Applicant Employment History your current or most recent employment first. Please list all jobs (including self-employment and note) which you have held, beginning with the most recent, and list and explain any gaps in employment space is needed, continue on the back page of this application.	
Empl Super Addre City/S Job D Reaso	oyer Name: rvisor Name:	
	N	
	oyer Name:	

Address:
City/State/ZIP:
Job Duties:
Reason for Leaving:
Dates of Employment (Month/Year):
Employer Name:
Supervisor Name:
Address:
City/State/ZIP:
Job Duties:
Reason for Leaving:
Dates of Employment (Month/Year):
13. Applicant's Education and Training
College/University Name and Address
Did you receive a degree? Yes No If yes, degree(s) received:
High School/GED Name and Address
Did you receive a degree? Yes No
Other Training (graduate, technical, vocational):
Please indicate any current professional licenses or certifications that you hold:
Awards, Honors, Special Achievements:
Military Service:
Yes No Branch:
Specialized Training:
14. References
List any two non-relatives who would be willing to provide a reference for you.
Name:
Address:
City/State/ZIP:
Telephone:
Relationship:

Name:	
Addres	ss:tate/ZIP:
Teleph	
	onship:
15.	Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:
CERT	TIFICATION
false o	by that the information provided on this application is truthful and accurate. I understand that providing r misleading information will be the basis for rejection of my application, or if employment commences liate termination.
my em freely (person	prize Bundrick Rail Services, LLC. to contact former employers and educational organizations regarding aployment and education. I authorize my former employers and educational organizations to fully and communicate information regarding my previous employment, attendance, and grades. I authorize those is designated as references to fully and freely communicate information regarding my previous yment and education.
employ In othe termin full and Simila Service	imployment relationship is created, I understand that unless I am offered a specific written contract of syment signed on behalf of the organization by its Owner, the employment relationship will be "at-will." or words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to ate the employment relationship at any time and without cause. With appropriate notice, I will have the d complete discretion to end the employment relationship when I choose and for reasons of my choice. Inly, my employer will have the right. Moreover, no agent, representative, or employee of Bundrick Rail es, LLC., except in a specific written contract of employment signed on behalf of the organization by its than the power to alter or vary the voluntary nature of the employment relationship.
I HAV ITS TI	E CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ERMS.
APPLI	ICANT SIGNATURE DATE