

# LEGACY READY-MIX LLC

1510 Irene Drive Irving, TX 75061

## Driver Employment Application

### APPLICANT

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City,State,Zip \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Other Phone # \_\_\_\_\_

Drivers License # \_\_\_\_\_ Social Sec. # \_\_\_\_\_

Email \_\_\_\_\_

### EMERGENCY CONTACT

Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Contact Other # \_\_\_\_\_

### APPLICANT EMPLOYMENT HISTORY

List All Current/Recent Employment:

(1) Employer Name \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Contact # \_\_\_\_\_

Date of Employment \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Job Duties \_\_\_\_\_

(2) Employer Name \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Contact # \_\_\_\_\_

Date of Employment \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Job Duties \_\_\_\_\_

# REFERENCES

Please List Three References

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

# CERTIFICATION

I certify that the information that is provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Legacy Ready-Mix LLC to contact former employers and references regarding my employment and creditability. I authorize my former employees and references to fully and freely communicate information regarding my previous employment and attendance. I authorize those persons designated as references to fully and freely communicate information regarding my character and integrity.

I understand that Legacy Ready-Mix LLC is an "At Will" company; meaning that employment may be terminated at any given time with cause. Similarly, I too have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice.

I HAVE READ THE ABOVE CERTIFICATION AND UNDERSTAND AND AGREE TO IT'S TERMS.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date