



L.K.L. Associates, Inc.

Layton Logan Orem  
West Jordan

Employment Application

LKL POLICY REQUIRES DRUG TESTING  
OF ALL APPLICANTS AND EMPLOYEES

L.K.L. Associates, Inc. is an equal opportunity employer. We consider applicants for all positions without regard to race, color, religion, gender, citizenship, national origin, age, veteran's status, or status as a qualified individual with a disability. If you are a qualified individual with a disability and need accommodation, please notify LKL's Manager of Human Resources at (801) 282-3920.

Personal Information

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date \_\_\_\_\_

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

Contact Phone No. (\_\_\_\_\_) \_\_\_\_\_ Length of Residence \_\_\_\_\_ If less than 3 years, list all addresses for the past 3 years

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

If hired, can you provide proof that you are at least 18 years old?  Yes  No

If hired, can you provide proof that you are a citizen of the United States, have permanent resident status, or are an alien authorized to work in this country?  Yes  No

How many years of school have you completed? \_\_\_\_\_ Currently attending school?  Yes  No If yes, school name \_\_\_\_\_

Position Desired \_\_\_\_\_ Referred By \_\_\_\_\_ Date you can start \_\_\_\_\_

Employment History

Are you presently employed?  Yes  No May we contact your present employer?  Yes  No

Company \_\_\_\_\_ Supervisor \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone \_\_\_\_\_

Job Title \_\_\_\_\_ Duties/Responsibilities \_\_\_\_\_

Start Date \_\_\_\_\_ Starting Wage \_\_\_\_\_ End Date \_\_\_\_\_ Ending Wage \_\_\_\_\_

Average Hours/Week \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Company \_\_\_\_\_ Supervisor \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone \_\_\_\_\_

Job Title \_\_\_\_\_ Duties/Responsibilities \_\_\_\_\_

Start Date \_\_\_\_\_ Starting Wage \_\_\_\_\_ End Date \_\_\_\_\_ Ending Wage \_\_\_\_\_

Average Hours/Week \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Company \_\_\_\_\_ Supervisor \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone \_\_\_\_\_

Job Title \_\_\_\_\_ Duties/Responsibilities \_\_\_\_\_

Start Date \_\_\_\_\_ Starting Wage \_\_\_\_\_ End Date \_\_\_\_\_ Ending Wage \_\_\_\_\_

Average Hours/Week \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Company \_\_\_\_\_ Supervisor \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone \_\_\_\_\_

Job Title \_\_\_\_\_ Duties/Responsibilities \_\_\_\_\_

Start Date \_\_\_\_\_ Starting Wage \_\_\_\_\_ End Date \_\_\_\_\_ Ending Wage \_\_\_\_\_

Average Hours/Week \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Office Use Only

Offer Date \_\_\_\_\_ Start Date \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Approving Mgr. \_\_\_\_\_ Clock No. \_\_\_\_\_ Navision Date \_\_\_\_\_ Resource ID \_\_\_\_\_ Entered By \_\_\_\_\_

IF YOU USE ILLEGAL DRUGS OR ABUSE ALCOHOL, DON'T BOTHER APPLYING FOR EMPLOYMENT AT LKL

## Driving Record

Driver's License No. \_\_\_\_\_ State \_\_\_\_\_ Class \_\_\_\_\_ Endorsements \_\_\_\_\_ Expiration Date \_\_\_\_\_

Do you currently have a Commercial Driver's License?  Yes  No If yes, list your date of birth \_\_\_\_\_

Have you had a driver's license in another state in the past ten (10) years?  Yes  No If yes, please list state(s) \_\_\_\_\_

List all tickets received in the past three (3) years, including date and type of violation (if none, write none) \_\_\_\_\_

List all vehicle accidents during the past ten (10) years, including date and nature of the accident (if none, write none) \_\_\_\_\_

Have you had your driver's license revoked, suspended, or denied in the past ten (10) years?  Yes  No

If yes, list date, violation, and length of suspension \_\_\_\_\_

## Skills and Qualifications

List all commercial vehicles and warehouse equipment for which you have experience driving/operating \_\_\_\_\_

List experience you have had in construction trades \_\_\_\_\_

List office and computer skills \_\_\_\_\_

## Safety and Health

If you are applying for a yard or delivery position, answer the following:

Can you regularly lift 100 pounds of building materials with or without a reasonable accommodation (mechanical assistance or help from other people)?  Yes  No

Can you regularly carry 100 pounds of building materials with or without a reasonable accommodation (mechanical assistance or help from other people)?  Yes  No

Can you work in a dusty environment or in adverse weather with or without a reasonable accommodation?  
 Yes  No

Can you work on a construction site or around forklifts, trucks, and other heavy equipment without creating a safety risk to yourself and/or others in the area?  Yes  No

L.K.L. Associates, Inc. is a building materials supplier involved in the handling, transportation, and delivery of building products to its customers and to their construction job sites. As such, LKL's operations are regulated by numerous local, state, and federal agencies. LKL expects its employees to comply with the regulations of these agencies while keeping first and foremost in their minds their personal safety and the safety of others in the workplace.

The applicant recognizes that this application for employment and that it and its related employment information packet in no way obligates the employer to employ the applicant or the applicant to accept employment from the employer. Unless otherwise stated in writing, no employment contract specifying term, position, compensation or any other condition exists between the applicant and the employer. In consideration of employment, the applicant agrees to conform to the rules and regulations of the company, which are subject to modifications at any any time, and agrees to become acquainted with and to abide by the company's policies, procedures, and safety rules. Failure to do so on the part of the employee may result in termination.

LKL is committed to establishing, maintaining, and supporting a drug-free and alcohol-free workplace and a safe and secure work environment. The applicant acknowledges and understands that all employees are required to participate in and support this effort.

## Permission to Obtain Information and Release of Liability

It is understood and agreed that the employer or employer's agent may investigate the applicant's background to verify all information of concern relative to the applicant's request for employment. Further, the applicant releases all employers and persons named herein from all liability and agrees to hold them harmless for furnishing said information. As required, the applicant agrees to furnish such additional information and to complete such examinations as may be required in the normal course of employment.

Applicant's Signature

## Employment At-Will

It is understood by the applicant that if hired by the company, in any capacity, that employment is at will and that the applicant's duties and schedules may be subject to modification at any time. The applicant understands that the needs of the company may make any or all of the following conditions mandatory: variable hours, overtime, shift work, split shift, changes in responsibilities, rotating work, and a schedule other than Monday through Friday.

Applicant's Signature

With my signature below, I certify that I read and completed this application and that all information provided by me is complete and true to the best of my knowledge. I understand that falsification or misrepresentation of facts on this application or in the employment information packet may result in disqualification or dismissal.