

# Wex Companies Inc

## Septic Check and Wexco Environmental

**JOB APPLICATION FORM** *Print clearly in black or blue ink. Answer all questions. Sign and date the form.*

Application date \_\_\_\_\_

How did you hear about this job? \_\_\_\_\_

### Personal information:

First/Middle/Last name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Driver's License Number/State of issue/Expiration Date/Class \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip code \_\_\_\_\_

Phone # (\_\_\_\_) \_\_\_\_\_

Previous three year's addresses \_\_\_\_\_

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

Are you eligible to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

If you are under age 18, do you have an employment/age certificate? Yes \_\_\_\_\_ No \_\_\_\_\_

### Position/Availability:

Position applied for \_\_\_\_\_ Days/Hours available

Monday \_\_\_\_\_

Friday \_\_\_\_\_

Tuesday \_\_\_\_\_

Saturday \_\_\_\_\_

Wednesday \_\_\_\_\_

Sunday \_\_\_\_\_

Thursday \_\_\_\_\_

Hours available: from \_\_\_\_\_ to \_\_\_\_\_

What date are you available to start work? \_\_\_\_\_

**Education:**

Name and address of school - Degree/Diploma - Graduation date

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Skills and qualifications: Licenses/ Skills/ Training/ Awards

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**Employment history for the last ten years:**

Present or last position:

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_

Position title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

\_\_\_\_\_

Salary: \_\_\_\_\_

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

**Previous position:**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Position Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**Previous position:**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Position Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**May We Contact Your Present and Past Employers?**

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

**Three personal references: (Other than family members)**

Name/ Title/ Address/ Phone/ Relationship

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**Driving record and experience:**

Nature and extent of experience in the operation of commercial motor vehicles (such as straight truck, bus, etc.)

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List of all accidents for the last three years (dates, nature of accident, any fatalities or personal injuries)

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List of all motor vehicle violations in the last three years.

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Have there been any denials, revocations, or suspensions of any license, permit, or privilege to operate a motor vehicle? Yes \_\_\_\_\_ No \_\_\_\_\_

I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above. My signature certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

**QUESTIONNAIRE** *Please provide answers to the following questions. Examples used can be from work or personal experiences.*

1. What do you think you owe to your employer?
2. Provide an example of how you solved a difficult problem.
3. What kind of work do you really love to do and what are you passionate about?
4. What kinds of responsibilities would you like to avoid in your next job?
5. Name one of the most rewarding things you have accomplished at a previous job.
6. Describe your ideal job.
7. Describe a time when you spoke up even though it was unpopular.
8. What activities are you involved in outside of work
9. Give an example of how you have improved yourself.
10. Tell me about a situation where you "blew it." How did you resolve or correct it to save face?

## **SUBMIT YOUR APPLICATION**

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