



726 NE Delphinium Drive,
Unit C
Madison, FL 32340
www.graylogging.com

Application for Employment

Date: _____

Name: (last) _____ (first) _____

Address: _____

Phone Number: (_____) _____

Date of Birth: _____ SSI#: _____ - _____ - _____

Driver's License: (State, Number, Expiration Date)

Position Applying for: _____

Date Available: _____

Are you a U.S. citizen? Yes / No

If no, what documentation do you have? _____

Do any of your immediate family/relatives currently work for Gray Logging LLC or have they been employed by Gray Logging LLC in the past Yes / No

How did you hear about this job?

Have you at any time, ever been convicted of a crime (felony, misdemeanor, etc.)? Yes / No
If yes, please state the crime and explain the nature thereof.

Have you, at any time, within the past two years tested positive for drugs or alcohol? Yes / No
If yes, please
explain

Why are you seeking employment from Gray Logging LLC? _____

What specific qualities, skills, etc. do you feel will contribute in creating a better work
environment?

Address for previous 3 years (if different from above): _____

Driving Experience (Nature of work and years of experience): _____

List all accident and moving violations for the past 3 years: _____

Have you ever had your commercial motor vehicle license denied, revoked, or suspended for any reason? Yes / No

If yes, please explain: _____

General Education:

School	Degree Attained	Years Attended

References:

Name	Relationship	Address	Phone Number

Past Work Experience:

Company name and address	Job Position	Supervisor	Nature of work

Gray Logging LLC reserves the right to refuse employment if the individual does not meet company expectations and requirements. Therefore, Gray Logging LLC is in no way obligated to hire anyone.

By signing this statement, you verify that the information provided on this application is in no way altered or liable for misinterpretation.

By signing this application, you also agree and understand that upon employment, failure to follow the rules, regulations, and policies of Gray Logging LLC will result in immediate termination.

Signature

Date



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850-973-3863

Gray Logging, LLC is required by the Federal Department of Transportation to contact previous employers for the purpose of obtaining records of Drug/Alcohol testing and safety compliance.

Gray Logging, LLC can not hire anyone who does not consent to this release of information.

By signing below, you give permission to Gray Logging, LLC to contact previous employers and obtain the aforementioned information.

Applicant's Name (please print)

Applicant's Signature

Date

The Applicant has the right to review information regarding their safety history according to FDOT guideline (391.23(i)(2)). The Applicant has the right to have any errors submitted by the previous employers corrected and to have a rebuttal statement attached to any alleged erroneous information, if an agreement can not be reached by the applicant and previous employer as to the correct nature of information.

