

Please send completed application  
to: [HR@onyxpaving.net](mailto:HR@onyxpaving.net)



ONYX PAVING COMPANY, INC.  
2890 E. LA CRESTA AVE  
ANAHEIM, CA 92806

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APPLICATION FOR EMPLOYMENT

Position Desired: \_\_\_\_\_ ( ) Part Time ( ) Full Time Date: \_\_\_\_\_

Name: \_\_\_\_\_

	Last	First	Middle	
Present			How long have	
Address			you lived there?	_____/_____ Years/Months
	Address	City	State	Zip

Phone No. \_\_\_\_\_ Cell No. \_\_\_\_\_ E-mail: \_\_\_\_\_

How did you hear about this opportunity? (name of website, referral, etc.) (Please be specific)  
\_\_\_\_\_

Have you ever worked for this company before? ( ) yes ( ) no

If yes, please give dates and position: \_\_\_\_\_

Do you have any family, friends or know anyone employed by Onyx Paving Company, Inc? ( ) yes ( ) no  
If yes, please detail:  
\_\_\_\_\_

Salary expectations for position desired \$ \_\_\_\_\_

**Record of Previous Employment**

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment for the last 10 years. If self-employed, give firm name and supply business references. (Attach additional page if necessary)

Present or Last Employer: \_\_\_\_\_

Address	City	ST	Zip Code
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Phone: \_\_\_\_\_

Employed From: (Month/Year) \_\_\_\_\_ to (Month/ Year) \_\_\_\_\_

Your Title or Position \_\_\_\_\_ Name and Title of Last Supervisor \_\_\_\_\_

Exact Reason for Leaving  
\_\_\_\_\_

Previous Employer \_\_\_\_\_

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Address City ST Zip Code

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

Employed From: (Month/Year) \_\_\_\_\_ to (Month/ Year) \_\_\_\_\_

Your Title or Position \_\_\_\_\_ Name and Title of Last Supervisor \_\_\_\_\_

Exact Reason for Leaving

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Previous Employer \_\_\_\_\_

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Address City ST Zip Code

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

Employed From: (Month/Year) \_\_\_\_\_ to (Month/ Year) \_\_\_\_\_

Your Title or Position \_\_\_\_\_ Name and Title of Last Supervisor \_\_\_\_\_

Exact Reason for Leaving

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Previous Employer \_\_\_\_\_

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Address City ST Zip Code

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

Employed From: (Month/Year) \_\_\_\_\_ to (Month/ Year) \_\_\_\_\_

Your Title or Position \_\_\_\_\_ Name and Title of Last Supervisor \_\_\_\_\_

Exact Reason for Leaving

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Have you ever been terminated or asked to resign from any job? ( ) yes ( ) no

If yes please explain circumstances:

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Please explain fully any gaps in your employment history:

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May we contact your current employer? ( ) yes ( ) no.

If no please explain: \_\_\_\_\_

Please indicate any actual experience; special training and qualifications that you have which you feel are relevant to the position for which you are applying.

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Have you ever used another name? ( ) yes ( ) no Is any additional information relative to change of name, use an assumed name, or nickname necessary to enable a check on your work or educational record? If yes, please explain:

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If hired, can you furnish proof that you are at least 18 years of age? ( ) yes ( ) no

Can you provide proof of right to work in the US? ( ) yes ( ) no

Are you capable of satisfactorily performing the essential job duties required of the position for which you are applying? ( ) yes ( ) no

Do you have adequate transportation to and from work? ( ) yes ( ) no

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DIPLOMA OR DEGREE	SUBJECTS OR MAJOR FIELD OF STUDY
High School				
College				
Business or Trade				
Other				

**Professional References**

Please list persons who know of your work performance – not relatives

Name	Occupation/ Company	Email Address or Physical Address	Telephone Number	Years Acquainted

**This application will be considered active for a maximum of thirty (30) days. If you wish to be considered for employment after that time you must reapply.**

**I certify that all of the information that I have provided on this application is true and accurate.**

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

\_\_\_\_\_  
Date

**APPLICANT’S STATEMENT & AGREEMENT**

In the event of my employment with Onyx Paving Company, Inc., I will comply with all rules and regulations of this Company.

Conditions of Hire: I understand that Employer reserves the right to require me to submit to a test for the presence of alcohol or drugs in my system prior to employment and at any time during my employment, to the extent permitted by law. I also understand that any offer of employment may be contingent on passing of a physical examination and a test for the presence of alcohol or drugs in my system, performed by a doctor selected by Employer. Further, I understand that at any time after I am hired, Employer may require me to submit to a physical examination and an alcohol and drug test, to the extent permitted by law. I consent to the disclosure of the results of any physical examination and related tests to Employer. I also understand that I may be required to consent to a background check and to consent to releasing my motor vehicle history. I understand that should I decline to sign these consents or decline to take any of the above tests, my application for employment may be rejected or my employment may be terminated. I understand that bonding may be a condition of hire. If it is, I will be so advised either before or after hiring and a bond application will have to be completed.

Authorization for Background Verification: I understand that Employer may contact my previous employers and I authorize those employers to disclose to Employer all records and information pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees and representatives, as well as other individuals who release information to Employer, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me. I authorize the persons named herein as personal references to provide Employer with any pertinent information they may have regarding me.

Statement of Full Disclosure: I hereby state that all the information I provided on this application or any other documents completed in connection with my employment application, and in any interview are true and correct. I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that if I am employed by Employer and any such information is later found to be false or incomplete in any respect, I may be dismissed.

At-Will Employment: If hired, I agree as follows: My employment and compensation is terminable at-will, is for no definite period, and my employment and compensation may be terminated by either the Employer or me at any time and for any reason whatsoever, with or without good cause. This is the entire agreement between the Employer and me regarding dispute resolution, the length of my employment, and the reasons for termination of employment, and this agreement supersedes any and all prior agreements regarding these issues. It is further agreed and understood that any agreement contrary to the foregoing must be entered into, in writing, by the President of the Company. No supervisor or representative of the Employer, other than its President, has any authority to enter into any agreement for employment for any specified period of time or make any agreement contrary to the foregoing. Oral representations made before or after I am hired do not alter this Agreement.

Introductory Period: If employed, I may be subject to an Introductory Period at the beginning of my employment in order that both the Employer and I evaluate my suitability for the position hired. The Introductory Period may be extended or be reimposed at any point in my employment. The existence of the Introductory Period does not alter, amend or remove the Employer’s at-will employment policy.

Severability: If any term or provision, or portion of this Agreement is declared void or unenforceable it shall be severed and the remainder of this Agreement shall be enforceable.

***IF YOU HAVE ANY QUESTIONS REGARDING THESE STATEMENTS, PLEASE ASK AN EMPLOYER REPRESENTATIVE BEFORE SIGNING. DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENTS AND AGREEMENT.***

I hereby acknowledge that I have read the above statements and understand the same.

X

**Signature of Applicant** **Date**