

APPLICATION FOR EMPLOYMENT
(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

Last Name	First	Middle	Date
Street Address			Home Telephone ()
City	State	Zip	Social Security #
Permanent Address (If different from above)			18 years or older YES NO
Have you ever applied for employment with us? YES NO If yes: Month/Year_____ Location_____			Position Desired
Special Skills	Drivers License #:		Salary Desired
Are you currently employed: YES NO If yes: May we contact your present employer YES NO			Date you can start
Are you either a U.S. Citizen or an Alien Authorized to work in the United States YES NO			Referred By:

EDUCATION

SCHOOL	NAME & LOCATION	NO. OF YEARS COMPLETED	DID YOU GRADUATE	COURSE OF STUDY
ELEMENTARY				
HIGH SCHOOL				
COLLEGE				
BUSINESS, TRADE, ETC.				

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS

(Exclude those which may disclose your race, color, religion or national origin)

MILITARY	Did you serve in the U.S. Armed Forces? Yes No
If yes, what Branch?	Are you currently in National Guard or Reserves? Yes No

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record.
Start with your present or most recent.

DATE Month/Year	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	SUPERVISOR	REASON FOR LEAVING
From:					
To:					
From:					
To:					
From:					
To:					
From:					
To:					

REFERENCES

Give the names of three persons not related to you, whom you have known at least one year.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

IN CASE OF EMERGENCY NOTIFY

NAME:

ADDRESS

PHONE

SIGNATURE

I certify that the facts contained in this application and any other forms that I fill out for my employment are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application or any other forms shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause.

DATE _____ SIGNATURE _____

OPERATOR POSITION QUESTIONNAIRE

NAME _____

DATE _____

PHONE NO. _____

DOZER EXPERIENCE? YES () NO () TYPE? _____

DO YOU FINISH GRADE? YES () NO ()

LOADER EXPERIENCE? YES () NO () TYPE? _____

BACKHOE EXPERIENCE?
Rubber Tire YES () NO () TYPE? _____

Track YES () NO () TYPE? _____

GRADER EXPERIENCE? YES () NO () TYPE? _____

PAN EXPERIENCE? YES () NO () TYPE? _____

HAUL TRUCK EXPERIENCE? YES () NO () TYPE? _____

DRAGLINE EXPERIENCE? YES () NO () TYPE? _____

CHAUFFERS LICENSE? YES () NO () LIC # _____

OTHER _____

SIGNATURE _____

M.J. STAVOLA FARMS, INC.
dba/M.J. STAVOLA INDUSTRIES
P.O. Box 1209, Anthony, FL 32617

AN OPEN LETTER TO ALL EMPLOYEES

We have recognized that drug and alcohol abuse is an on-the-job problem as well as a social problem. We believe the abuse of alcohol and use of illegal drugs endangers the health and safety of the abusers and of others around them.

M.J. Stavola Farms, Inc. is committed to creating and maintaining a Drug-Free Workplace without jeopardizing the job security of valued but troubled employees, provided they are prepared to help us help them.

Our Drug-Free Workplace policy now formally states that substance abuse will not be tolerated **ON** or **OFF** the job for employees of our Company. This prohibition includes the possession, use, or sale of illegal drugs and the abuse of alcohol. Company sponsored activities or other social events that we attend during which alcoholic beverages are served are not considered alcohol abuse just because alcohol was served.

To ensure that M. J. Stavola Farms, Inc. becomes and remains a Drug-Free Workplace, a program of Drug Testing was begun on July 1, 1992. To ensure that our Companies remain a Drug-Free Workplace, a program of Drug Testing will continue. Let it be clearly understood by everyone that it is a condition of employment for everyone that they avoid entirely the use, possession, sale or any association whatsoever with illegal drugs and/or the abuse of alcohol. Employees who are found on the job to be under the influence of illegal drugs or alcohol, or who violate this policy in other ways **MAY** be terminated, **EVEN FOR THE FIRST OFFENSE.**

It is important that all of us work together to deal with substance abuse to make our Company a safer and more rewarding place to work.

Sincerely,



William H. Stavola
President