



Application for Employment

www.peavineconst.com

Today's Date _____

PERSONAL DATA

FULL NAME

Last _____ First _____ Middle _____

ADDRESS

Street _____

City _____ State _____ Zip Code _____

Preferred Name or Nickname	Telephone Numbers	E-mail Address
	Home: _____ Cell: _____	

Are you acquainted with anyone who works for Peavine Construction, Inc? Yes _____ No _____

If yes, please give their name: _____

Are you legally entitled to work in the USA? _____

EMPLOYMENT DESIRED

Position you are applying for: _____

Date available for work: _____

Total hours available per week: _____

Are there any days or hours you are unable or unwilling to work? Please specify: _____

Are you willing to travel? _____

EDUCATION

CIRCLE HIGHEST GRADE COMPLETED: ELEM 6 7 8 HIGH 9 10 11 12 COLLEGE 13 14 15 16 17 18 19

Additional job-related seminars, courses, workshops, special training or other educational experiences: _____

OSHA Certification: 10 Hour 30 Hour (please circle which class you have completed)

MSHA Certification: Yes No

EMPLOYMENT EXPERIENCE

Please complete all information even if attaching a resume.

Employer		Work Performed	
Address			
Phone Number			
Job Title	Supervisor		
Reason for leaving			
Dates Employed		Hourly Rate/Salary	
From _____	To _____	Starting _____	Final _____

Employer		Work Performed	
Address			
Phone Number			
Job Title	Supervisor		
Reason for leaving			
Dates Employed		Hourly Rate/Salary	
From _____	To _____	Starting _____	Final _____

Employer		Work Performed	
Address			
Phone Number			
Job Title	Supervisor		
Reason for leaving			
Dates Employed		Hourly Rate/Salary	
From _____	To _____	Starting _____	Final _____

**PEAVINE CONSTRUCTION INC.
PRE-EMPLOYMENT
DRUG TESTING and PHYSICAL PROGRAM
NOTICE TO APPLICANTS**

Peavine Construction Company has a vital interest in maintaining safe, healthful and efficient working conditions for its clients and employees. Using or being under the influence of drugs and/or alcohol on the job may pose serious safety and health risks not only for the user, but to the public and all those who work with the user. The possession use or sale of an illegal drug or controlled substance may also pose unacceptable risks to safe, healthful and efficient operations.

The position the prospective employee is applying for is SAFETY SENSITIVE. If the pre-employment test returns POSITIVE for marijuana, the job offer will be rescinded.

To meet this compelling interest, individuals who wish to be considered for employment must agree to **PRE-EMPLOYMENT DRUG AND ALCOHOL TESTING**.

PROSPECTIVE EMPLOYEES WILL ALSO RECEIVE A PRE-EMPLOYMENT PHYSICAL, the results of which will be made available to Peavine Construction Inc. Management, Human Resources and the Safety Director.

By completing and signing this Notice and the attached Application of Employment, the applicant understands and agrees to submit to drug testing and a pre-employment physical as a condition of our employment offer as well as to alcohol and drug testing during the course of employment as provided for in Peavine Construction Company's Drug and Alcohol Policy. The applicant further understands and agrees to release Peavine Construction Company and its directors, officers, agents, employees, parents, subsidiaries and affiliated concerns to include any doctors and medical facilities from any and all liability, claims, demands, damages and causes of action of every kind and nature arising out of or resulting from or in connection with submitting to drug and alcohol testing, the pre-employment physical and any decision concerning employment made by Peavine Construction Company in whole or in part, based upon the results of drug and alcohol testing and/or the pre-employment physical.

ANY APPLICANT WHO IS UNWILLING TO AGREE TO THESE CONDITIONS SHOULD NOT APPLY FOR EMPLOYMENT WITH PEAVINE CONSTRUCTION COMPANY.

Applicant's Signature

Date

WORK EXPERIENCE FORM

If applying for a commercial driving position you are required to have a current DMV print-out and physical card.

Please indicate which types of controls you are familiar with, CAT, John Deere, etc.

YEARS

PIPE CREW: WATER/SEWER/GAS	
MASS GRADING:	
BACKHOES/EXCAVATORS:	
LOADERS:	
SCRAPERS:	
DOZERS:	
HAUL TRUCKS:	
WATER TRUCKS:	
END DUMPS:	
TRIPLE TRANSFERS:	

WORKER'S COMPENSATION HISTORY PRE-HIRE QUESTIONNAIRE

Have you ever had an industrial accident or illness?

Have you ever lost time from work for a work-related injury or illness?

Have you ever seen a medical or chiropractic doctor for any industrial injury or illness?

Have you ever filed a claim for benefits under the Nevada Industrial Insurance Act or the Nevada Occupational Disease Act?

Have you ever filed an industrial claim in any other state or country?

Have you ever received worker's compensation benefits in Nevada or any other state or country?

Have you ever received a Permanent Partial Disability (PPD) award from Nevada or any other state or country?

If you require a reasonable accomodation to perform the essential job functions for any position which you are applying for, what reasonable accomodation would be needed to perform the essential functions of the job?

Form W-4 (2019)

Future developments. For the latest information about any future developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. You may claim exemption from withholding for 2019 if **both** of the following apply.

- For 2018 you had a right to a refund of **all** federal income tax withheld because you had **no** tax liability, **and**
- For 2019 you expect a refund of **all** federal income tax withheld because you expect to have **no** tax liability.

If you're exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2019 expires February 17, 2020. See Pub. 505, Tax Withholding and Estimated Tax, to learn more about whether you qualify for exemption from withholding.

General Instructions

If you aren't exempt, follow the rest of these instructions to determine the number of withholding allowances you should claim for withholding for 2019 and any additional amount of tax to have withheld. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

You can also use the calculator at www.irs.gov/W4App to determine your tax withholding more accurately. Consider

using this calculator if you have a more complicated tax situation, such as if you have a working spouse, more than one job, or a large amount of nonwage income not subject to withholding outside of your job. After your Form W-4 takes effect, you can also use this calculator to see how the amount of tax you're having withheld compares to your projected total tax for 2019. If you use the calculator, you don't need to complete any of the worksheets for Form W-4.

Note that if you have too much tax withheld, you will receive a refund when you file your tax return. If you have too little tax withheld, you will owe tax when you file your tax return, and you might owe a penalty.

Filers with multiple jobs or working spouses. If you have more than one job at a time, or if you're married filing jointly and your spouse is also working, read all of the instructions including the instructions for the Two-Earners/Multiple Jobs Worksheet before beginning.

Nonwage income. If you have a large amount of nonwage income not subject to withholding, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you might owe additional tax. Or, you can use the Deductions, Adjustments, and Additional Income Worksheet on page 3 or the calculator at www.irs.gov/W4App to make sure you have enough tax withheld from your paycheck. If you have pension or annuity income, see Pub. 505 or use the calculator at www.irs.gov/W4App to find out if you should adjust your withholding on Form W-4 or W-4P.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Specific Instructions

Personal Allowances Worksheet

Complete this worksheet on page 3 first to determine the number of withholding allowances to claim.

Line C. Head of household please note: Generally, you may claim head of household filing status on your tax return only if you're unmarried and pay more than 50% of the costs of keeping up a home for yourself and a qualifying individual. See Pub. 501 for more information about filing status.

Line E. Child tax credit. When you file your tax return, you may be eligible to claim a child tax credit for each of your eligible children. To qualify, the child must be under age 17 as of December 31, must be your dependent who lives with you for more than half the year, and must have a valid social security number. To learn more about this credit, see Pub. 972, Child Tax Credit. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line E of the worksheet. On the worksheet you will be asked about your total income. For this purpose, total income includes all of your wages and other income, including income earned by a spouse if you are filing a joint return.

Line F. Credit for other dependents. When you file your tax return, you may be eligible to claim a credit for other dependents for whom a child tax credit can't be claimed, such as a qualifying child who doesn't meet the age or social security number requirement for the child tax credit, or a qualifying relative. To learn more about this credit, see Pub. 972. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line F of the worksheet. On the worksheet, you will be asked about your total income. For this purpose, total

----- Separate here and give Form W-4 to your employer. Keep the worksheet(s) for your records. -----

Form W-4 Department of the Treasury Internal Revenue Service		Employee's Withholding Allowance Certificate		OMB No. 1545-0074 2019	
▶ Whether you're entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.					
1 Your first name and middle initial		Last name		2 Your social security number	
Home address (number and street or rural route)			3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. <small>Note: If married filing separately, check "Married, but withhold at higher Single rate."</small>		
City or town, state, and ZIP code			4 If your last name differs from that shown on your social security card, check here. You must call 800-772-1213 for a replacement card. ▶ <input type="checkbox"/>		
5 Total number of allowances you're claiming (from the applicable worksheet on the following pages)				5	
6 Additional amount, if any, you want withheld from each paycheck				6 \$	
7 I claim exemption from withholding for 2019, and I certify that I meet both of the following conditions for exemption.					
<ul style="list-style-type: none"> • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. 					
If you meet both conditions, write "Exempt" here ▶				7	
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.					
Employee's signature (This form is not valid unless you sign it.) ▶					
8 Employer's name and address (Employer: Complete boxes 8 and 10 if sending to IRS and complete boxes 8, 9, and 10 if sending to State Directory of New Hires.)				Date ▶	
9 First date of employment			10 Employer identification number (EIN)		