

Town of Russell — Grader/Equipment Operator Application

Position Applied For: Grader/Equipment Operator

Date: _____

Applicant Information

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Are you legally authorized to work in the United States?

☐ Yes ☐ No

Are you at least 18 years old?

☐ Yes ☐ No

Driver's License & Qualifications

Driver's License No.: _____

State: _____ Expiration Date: _____

CDL Class: ☐ A ☐ B ☐ C ☐ None

CDL Endorsements/Restrictions: _____

Do you have a current DOT medical certificate, if required for the position?

☐ Yes ☐ No ☐ Not Applicable

Have you ever had your driver's license suspended or revoked?

☐ Yes ☐ No

If yes, please explain:

Have you had any moving violations or OWIs/DWIs within the past five years?

☐ Yes ☐ No

If yes, please explain:

Equipment Experience

Please indicate your experience:

?

Equipment	Years Experience
Motor grader	_____
Dump truck	_____
Plow truck	_____
Loader	_____

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Backhoe	_____
Skid steer	_____
Excavator	_____
Tractor	_____
Other heavy equipment	_____

Describe your experience operating a motor grader:

Do you have experience with:

- ☐ Road grading
- ☐ Gravel road maintenance
- ☐ Shouldering
- ☐ Culvert work
- ☐ Ditching
- ☐ Snow plowing
- ☐ Snow removal
- ☐ Sand/salt application
- ☐ Road patching
- ☐ Brush/vegetation clearing
- ☐ Equipment maintenance
- ☐ Pre-operation equipment inspections

Employment History

Most Recent Employer

Employer: _____

Position: _____

Dates Employed: _____

Reason for Leaving: _____

Supervisor: _____

Phone: _____

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Municipal/Highway Experience

Have you previously worked for a municipality, county or other governmental entity?

☐ Yes ☐ No

If yes:

Employer: _____

Position: _____

Dates: _____

Duties: _____

Have you previously worked for the **Town of Russell**?

☐ Yes ☐ No

If yes, dates employed: _____

Position(s): _____

Availability

Are you available for emergency snow and ice operations?

☐ Yes ☐ No

Are you willing to work nights, weekends and holidays when necessary?

☐ Yes ☐ No

Typical availability: _____

References

Reference 1

Name: _____

Relationship: _____

Phone: _____

Reference 2

Name: _____

Relationship: _____

Phone: _____

Applicant Certification

I certify that the information provided on this application is true and complete to the best of my knowledge. I understand that providing false or misleading information may result in rejection of my application or termination of employment.

I authorize the Town of Russell to verify the information provided in this application and to contact former employers and references for purposes of evaluating my qualifications for employment.

I understand that submission of this application does not guarantee employment and that employment is subject to approval by the appropriate Town authority.

Applicant Signature: _____

Date: _____

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For Town Use Only

Date Application Received: _____

Interview Date: _____

☐ References Checked

☐ Driving Record Reviewed

☐ CDL Verified

☐ Qualifications Verified

Board Action:

Date: _____

Motion/Resolution No.: _____

☐ Approved ☐ Denied ☐ Tabled

Hourly Rate Approved: \$ _____

Effective Date: _____

Authorized By: _____

Title: _____