

Application for Employment

Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ Social Security #: _____

**(Date of birth is requested for insurance purposes and insurance quotes only, for persons applying for position of driver, and will NOT be used to discriminate against any applicant.)*

Are you a US citizen? _____ YES _____ NO

If no, do you have legal authorization to work in the United States? _____

Driver License # and State: _____

Expiration date: _____

Do you have an "F" endorsement, or a CDL? _____ YES _____ NO

If yes, what do you have? _____

Have you received a DUI or DWI within the last 5 years?

_____ YES _____ NO

If yes, please explain:

Please list all accidents and citations you have received for the last three years, including dates, and give a brief explanation for each. If additional space is needed, please use the back of this form:

Please list all arrests and convictions within the last five years. Please list the date, arresting agency (place), charges, and disposition:

In case of emergency contact: _____

Relationship: _____ **Phone number:** _____

Do you have any physical limitations, which would prohibit you from doing the job for which you are applying? _____ YES _____ NO

If yes, please explain: _____

Highest grade completed in school: _____

Degree or diploma received: _____

Please list all previous employers for the last three years, starting with the most recent: (If additional space is needed, please use the back of this form.)

1.) Employer name: _____

Address: _____

Phone number: _____ **Contact:** _____

Dates worked: From _____ **To** _____

Reason for Leaving: _____

Ending rate of pay: _____ Position: _____

2.) Employer name: _____

Address: _____

Phone number: _____ Contact: _____

Dates worked: From _____ To _____

Reason for Leaving: _____

Ending rate of pay: _____ Position: _____

3.) Employer name: _____

Address: _____

Phone number: _____ Contact: _____

Dates worked: From _____ To _____

Reason for Leaving: _____

Ending rate of pay: _____ Position: _____

4.) Employer name: _____

Address: _____

Phone number: _____ Contact: _____

Dates worked: From _____ To _____

Reason for Leaving: _____

Ending rate of pay: _____ Position: _____

Have you ever been fired, or asked to resign from a job?

_____ YES _____ NO

If yes, please explain:

Please list any prior experience, skills or qualifications that you have, for the job in which you are applying, that you would like for us to consider:

Please list three character references, NONE of which are relatives or previous employers:

1.) Name: _____ **Phone number:** _____

Relationship: _____ **Years known:** _____

2.) Name: _____ **Phone number:** _____

Relationship: _____ **Years known:** _____

3.) Name: _____ **Phone number:** _____

Relationship: _____ **Years known:** _____

Please list two family member references:

1.) Name: _____ **Phone number:** _____

Relationship: _____

2.) Name: _____ **Phone number:** _____

Relationship: _____

Please list any other information that you would like for us to consider:

What is the salary, or rate of pay desired? _____

By my signature below, I certify that all information I have provided in this application is true and correct to the best of my knowledge, and I also understand that any false information will result in my immediate termination, if hired. Additionally, I understand that I will not be considered for employment if any false information is given. I also understand, and give my permission for you to verify all information contained herein, in conjunction with hiring, employment, or as may be needed in the future. This may include a DMV records check, employment references, personal references, verifying residence, credit bureau check, and criminal background check. By my signature below, I am giving my consent and authorization to these inquiries.

X

Signature

Date: _____