

Employment Application



Personal Information

Date _____ Social Security # _____

Name _____
Last First Middle Int.

Phone Number _____

Present Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Employment Desired

Position _____ Are you employed now? _____

Date you can start _____ Wages Desired _____

Education

| | School Name & Location | Years Attended | Date Grad. |
|--------------|------------------------|----------------|------------|
| High School | | | |
| Trade School | | | |
| College | | | |
| Other | | | |

Physical Record

List any Physical Limitation _____

Do you have any problems hearing? _____ Vision? _____

Have you ever been injured? _____

Give Details:

In case of emergency notify _____
Name Number

Employment History

| Date | Name & address of Employer | Phone | Position | Wages | Reason for Leaving |
|------|----------------------------|-------|----------|-------|--------------------|
| From | | | | | |
| To | | | | | |
| From | | | | | |
| To | | | | | |
| From | | | | | |
| To | | | | | |
| From | | | | | |
| To | | | | | |

Equipment Operators:

Please list the type of equipment you are able to operate:

| Equipment | Years of Experience |
|-----------|---------------------|
| | |
| | |
| | |

Truck Drivers:

CDL? _____

Class? _____

Specific Type Truck Experience: (Ex. Tractor Trailer) _____

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

| | | | |
|--|--|--|--|
| | | | |
| | | | |
| | | | |
| | | | |

I authorize investigation of all statements contained in this application and that a background check will be done. I understand that misrepresentation or omission of the above facts is cause for dismissal. Further, I understand that my employment is not guaranteed for any specific length of time, and regardless of when my wages or salary is to be paid, I can be terminated at any time.

Date _____

Signature _____