

Employment Application

Position applying for:

EMPLOYEE INFORMATION

| Name: | | | | | | | | |
|---|---|--|--------------|-----------|--|--|--|--|
| Last | First | Middle | | | | | | |
| Telephone: | Email: Alternate telephone: | | | | | | | |
| Address: | | | | | | | | |
| Are you able to perform the est the position with or without ac Yes No If necessary for the job are yo 14 15 16 (Cl | commodations? | If necessary for the job, I am able to: Work overtime? Yes Provide a valid Driver's License? Yes If so, fill out the following: Issuing state: Type: Type: | | | | | | |
| $\square 18 \square 19 \square 21$ | | Endorsement(s): Hazardous Material Passengers | | | | | | |
| I am legally eligible for employ Yes No I am seeking a permanent pos | | TankersTank with Hazardous MaterialsSchool BusDouble/Triple trailers | | | | | | |
| I will be able to report to work | | | | | | | | |
| days after being notified I am hired Split Graveyard Other: | | | | | | | | |
| | | | | | | | | |
| | EM | PLOYMENT HISTORY | | | | | | |
| List most recent employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here, in the summary following this section or on an extra sheet of paper if necessary. No more than 10 years history recommended. | | | | | | | | |
| Employer name and address: | Position title/duties, s | kills: | Start date: | End date: | | | | |
| | | | Reason for I | eaving: | | | | |
| Pay: \$ | | | | | | | | |
| Per: | Supervisor: | Telephone: | | | | | | |
| Employer name and address: | Position title/duties, s | kills: | Start date: | End date: | | | | |
| | | | Reason for I | eaving: | | | | |
| Pay: \$ | | | | | | | | |
| Per: | Supervisor: | Telephone: | | | | | | |
| Employer name and address: | Position title/duties, s | kills: | Start date: | End date: | | | | |
| | | | Reason for | eaving: | | | | |
| - | | | | | | | | |
| Pay: <u>\$</u> | Supervicer | Telephone | _ | | | | | |
| Per: Employer name and address: | Supervisor: Position title/duties, s | Telephone: | Start date: | End date: | | | | |
| | | | | | | | | |
| | | | Reason for I | eaving: | | | | |

\$

Supervisor:

Pay:

Per:

Telephone:

| EDUCATION | | | | | | | | |
|--|------------------|--------------------|---------------|----------------|--------------------|--|--|--|
| | Institution name | Years completed | Field of stuc | ly | Graduate or degree | | | |
| High school | | | | | | | | |
| College/university Business/technical | | | | | | | | |
| Additional | | | | | | | | |
| MILITARY | | | | | | | | |
| Are you a veteran? Duty/specialized trainir | Yes | 🗌 No | | | | | | |
| SKILLS & QUALIFICATIONS | | | | | | | | |
| Other qualifications such as special skills, abilities or honors that should be considered: | | | | | | | | |
| Types of computers, software, and other equipment you are qualified to operate or repair: | | | | | | | | |
| Professional licenses, certifications or registrations: | | | | | | | | |
| Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to the employer's attention: | | | | | | | | |
| Typing speed: | per minute | | | | | | | |
| REFERENCES | | | | | | | | |
| List two personal references who are not relatives or former supervisors. | | | | | | | | |
| Name | Address | ٢ | Felephone | Occupation | Years known | | | |
| Name | Address | ٦ | Telephone | Occupation | Years known | | | |
| | | CO | NTACT | | | | | |
| In case of accident or illness, please contact: Name: | | | | Daytime phone: | | | | |
| Address: | | | | | Relationship: | | | |
| INFORMATION TO THE APPLICANT | | | | | | | | |
| As part of our procedure for processing your employment application, your personal and employment references may be checked. If you | | | | | | | | |

have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references. If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United

States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above.

Signature of Applicant

Date

Equal Employment Opportunity: While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.