

# APPLICATION FOR EMPLOYMENT



**TRANSPORTATION INC.**  
AN EQUAL OPPORTUNITY EMPLOYER

TERMINAL ADDRESS:

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DATE OF THIS APPLICATION \_\_\_\_\_ TYPE OF WORK DESIRED \_\_\_\_\_

## GENERAL INFORMATION:

Name (Last, First, Middle)		List any other names used in previous employment or schooling		
Present Address (House Number, Street)	City	State	Zip Code	Phone
Previous Address (if above is less than 3 years)	City	State	Zip Code	Phone
Previous Address (if above is less than 3 years)	City	State	Zip Code	Phone
Location Desired	Date Available	Salary Requirement		
Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? <input type="checkbox"/> Yes <input type="checkbox"/> No	State age only if under 23	Social Security Number		
Employed by or applied to us before <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a valid Driver's License (if one should be required for the job)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
In case of Emergency notify (Name)	Address		Phone	
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date, Place, Charge, Penalty			

## WHAT LED YOU TO SEEK EMPLOYMENT WITH US?

Self	State Emp. Sec. Comm.	School	Referred by Company Employee	Newspaper Ad	Agency, City or Community Organization

## EDUCATION:

	Name and Location of School	Dates Attended		Check Highest Year Completed	Major and Minor Fields of Study	Degree(s) or Diplomas	Grade Point Average
		To	From				
High School				9 10 11 12			
Technical School							
College				1 2 3 4			
				1 2 3 4			
Graduate School							
Other							

## UNITED STATES MILITARY SERVICE:

Branch of Service	Date Entered	Date Discharged
Service Duties		

NOTE: D.O.T. Requires that Employment for at Least 10 Years be Shown  
(ATTACH SHEET IF MORE SPACE IS NEEDED)

## WORK EXPERIENCE

List all employers for the past 10 years beginning with present employer first

Employer		Job Title
Address		Nature of Work
Employment Dates From Mo / Yr      To Mo / Yr	Salary \$	
Supervisor	Phone #	Reason for Leaving
Employer		Job Title
Address		Nature of Work
Employment Dates From Mo / Yr      To Mo / Yr	Salary \$	
Supervisor	Phone #	Reason for Leaving
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## SKILLS:

### EXPERIENCE AND QUALIFICATIONS — OFFICE, SUPERVISORY, MANAGERIAL

Typing _____ WPM	Years Experience	Dock Supervisor	
Shorthand _____ WPM		City Dispatch	
Transcriber		Line Dispatch	
PBX		Terminal Management	
Rates / Tariffs		Sales Management	
CRT / PC		Other	
Explanation			

## EXPERIENCE AND QUALIFICATIONS — PLATFORM

List types of platform experience and years of each \_\_\_\_\_

List platform equipment you can operate (Lift Truck, etc.) \_\_\_\_\_

### EXPERIENCE AND QUALIFICATIONS — DRIVERS, SUPERVISORS, SALES AND MANAGERIAL

	STATE	LICENSE NO.	TYPE	EXPIRATION DATE
DRIVER LICENSES				

- A. Have you ever been denied a license, permit or privilege to operate a motor vehicle?  Yes  No
- B. Has any license, permit or privilege ever been suspended or revoked?  Yes  No

IF THE ANSWER TO EITHER A OR B IS "YES" ATTACH STATEMENT GIVING DETAILS.

### DRIVING EXPERIENCE

Class of Equipment	Type of Equipment (Van, Tank, Flat, Etc.)	Dates		Approx. No. of Miles (Total)
		From	To	
Straight Truck				
Tractor and Semi Trailer				
Tractor - Two Trailers				
Other				

List States operated in the last five years \_\_\_\_\_

Show special courses or training that will help you as a driver \_\_\_\_\_

Which safe driving awards do you hold and from whom? \_\_\_\_\_

### ACCIDENT RECORD FOR PAST 3 YEARS OR MORE (ATTACH SHEET IF MORE SPACE IS NEEDED)

Dates	Nature of Accident (Head-On, Rear-End, Upset, Etc.)	Fatalities	Injuries
Last Accident			
Next Previous			
Next Previous			

### TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS (OTHER THAN PARKING VIOLATIONS)

LOCATION	DATE	CHARGE	PENALTY

## EXPERIENCE AND QUALIFICATIONS — MAINTENANCE

List types of maintenance experience and years of each \_\_\_\_\_

Show Equipment You Can Operate	Check	Years of Experience	Equipment	Check	Years of Experience
Woodworking Equipment			Electric Welder		
Sheet Metal Equipment			Oxyacetylene Welder		
Clutch Rebuilding			Paint Spray Gun		
Differential Rebuilding			Wheel & Tire Balancing Machine		
Transmission Rebuilding			Tire Recapping Mold		
Body Work			Engine Dynamometer		
Frame and Axle Straightening Equipment			Chassis Dynamometer		
Electrical and Ignition Repair			Magnetic Crack Tester		
Engine Rebuilding Equipment			Vacuum and Air Brakes		
Diesel Injection Equipment			Other		

List courses and training in maintenance work \_\_\_\_\_

### CERTIFICATION OF APPLICATION AND CONDITIONS OF EMPLOYMENT: [REDACTED]

I certify that this application was completed by me and that all entries on it and information in it are true and complete to the best of my knowledge. I understand and agree that any misrepresentations of information given herein by me shall be considered an act of dishonesty and be grounds for refusal to hire and, if hired, disciplinary action, including the termination of my employment. I authorize this company or its agents to investigate my background to ascertain any and all information of concern to my qualifications for employment, and hereby authorize each employer and person named herein to furnish such information to this company or its agents and release such employers and persons from all liability for damages as a result of furnishing such information to this company or its agents. I understand and agree that under the Fair Credit Reporting Act, Public Law 91-508, that this investigation may include an Investigating Consumer Report, including information regarding my character, general reputation, personal characteristics, and mode of living. I understand and agree to furnish additional information and complete such examinations as may be required by this company to qualify for the applied position and/or to complete my employment file. I understand and agree that my employment will be contingent upon satisfactorily passing a physical examination required by this company.

I UNDERSTAND AND AGREE THAT IF I AM HIRED, I WILL CONFORM AND COMPLY WITH THE RULES AND REGULATIONS OF THIS COMPANY. I UNDERSTAND AND AGREE THAT IF I AM HIRED, THE LENGTH OF MY EMPLOYMENT IS NOT GUARANTEED. I UNDERSTAND AND AGREE THAT IF I AM HIRED, MY EMPLOYMENT WITH THIS COMPANY IS AT WILL, AND, ACCORDINGLY, (1) MY JOB ASSIGNMENTS, DUTIES AND COMPENSATION MAY BE CHANGED, AT ANY TIME, AT THE OPTION OF THIS COMPANY; (2) MY EMPLOYMENT WITH THIS COMPANY CAN BE TERMINATED WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT THE OPTION OF EITHER THIS COMPANY OR ME; AND, (3) THAT NO SUPERVISOR, MANAGER OR EXECUTIVE OF THIS COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO OR ALTERING THE FOREGOING AND/OR ANY OF THIS COMPANY'S POLICIES AND PROCEDURES WITHOUT THE PRIOR EXPRESS WRITTEN APPROVAL OF THE PRESIDENT OF THIS COMPANY.

Date \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

#### FOR OFFICE USE ONLY: [REDACTED]

Post-Employment Information (Do Not Complete)

Sex	<input type="checkbox"/> M <input type="checkbox"/> F	Spouse's Name	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Other
If Not Hired, Reason for Rejection			Date of Birth