

EMPLOYMENT APPLICATION

Personal Information

Name (Last, First, MI)

Street Address

City, State, Zip

Home #

Cell #

Social Security #

E-mail

Are you over the age of 18? Yes No

Are you legally authorized to work in the U.S.? Yes No

Highest grade completed:

Have you ever been convicted of a crime other than a minor traffic violation? (Note: Answering "yes" will not necessarily eliminate you from consideration for employment, only as it substantially relates to the job in question. Yes No If yes, provide information regarding the conviction (offense, date and sentence)

Are you currently employed? Yes No

May we contact your employer? Yes No

Are you currently on "lay off" status and subject to recall? Yes No

Are you currently on "lay off" statue and not subject to recall? Yes No

Have you worked under any other names in the past? Yes No

Have you ever been terminated from an employer for reason other than downsizing?

Yes No If yes, please give reason:

Driver's License

Do you possess a valid Driver's License? Yes No

Driver's License # _____ State of Issue _____ Expiration _____

Do you hold a valid Chauffeur's Driver License? Yes No

Do you hold a valid Commercial Driver's License? Yes No

If driving is a requirement of the position applied for, have you in the last 7 years been convicted of DUI/DWI? Yes No

If hired, do you have a reliable means of transportation to and from work? Yes No

(Note: HR will need license to copy)

Employment Desired

Position applied for

Referral Source: How did you hear about this job? Did anyone refer you?

Availability: Check all that apply: Full Time Part Time Temporary Any

Days (8am-4:30pm) Split (12pm-8:30pm) Nights (3:30pm-12am) Overtime Weekend Call Out

Potential Start Date: _____ Minimum Acceptable Salary: _____

License, Registration or Certifications (i.e. CDL, ASE, CAT, Cummins, International, Welding, etc.)

Special Training Programs & Seminars you have completed in the last 5 years: (i.e. Ford 6.0, LP Transfer, etc.)

What are your hobbies? How do you spend your free time?

Additional Information

Do you have any friends or relatives employed by this company? Yes No

If yes, please provide their names and relationship to you:

Are you able to perform all of the essential functions of the job for which you are applying with or without reasonable accommodation? Yes No

If hired, are there any accommodations the company would need to provide so that you can perform all those essential functions and duties of the position being applied for? If yes, please explain: Yes No

You will be required to take and pass a controlled substance drug test as part of this interview; do you have a problem with this? Yes No

If you are offered this job, you may be required to undergo a medical examination before starting employment. Do you have a problem with this? Yes No (Note: medical examination may occur after an offer has been made and will condition such offer on results)

Work Experience: List below, beginning with your most recent position, all of your work experience. If your title and duties changed substantially in the course of your employment in any one organization, indicate such changes clearly and as separate employment. Experience that cannot be confirmed is not acceptable. Account for all periods of unemployment. You must complete this section even if attaching a resume.

Employment History

Present Employer or Last Employer Address City, State	
Employment Start & End Date	
Approximate # of Hours Worked per week	
Supervisor & Phone #	
Salary	Starting Salary \$ Per/ Final Salary \$ Per/
Reason for Leaving	
Describe the duties of your position	

Employer Name Address City, State	
Employment Start & End Date	
Approximate # of Hours Worked per week	
Supervisor & Phone #	
Salary	Starting Salary \$ Per/ Final Salary \$ Per/
Reason for Leaving	
Describe the duties of your position	

Employer Name Address City, State	
Employment Start & End Date	
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Describe the duties of your position	

Which of these jobs did you like best?	
What did you like most about this job?	

Please read each statement closely and initial each acknowledging your understanding

Disclosure to Applicants Concerning Drug/Alcohol Testing

_____ If you are offered a position with Midwest Truck & Trailer, Inc., you may be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

Complete and Accurate Information

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my changes for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

At-Will Employment

_____ I understand and agree that if I am employed, my employment will be “at-will”, which means that Midwest Truck & Trailer, Inc. may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the Company will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superseded and that no promise or representation contrary to the foregoing is binding on the Company unless made in writing and signed by the Company’s president.

Testing Authorization

_____ If offered a position with Midwest Truck & Trailer, Inc., I hereby agree to any legally permit physical, psychological, skill, drug or medical test required by the Company as a condition of employment.

Investigation Authorization

_____ I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background.

Company Obligation

_____ I understand and agree that Midwest Truck & Trailers acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that the company has agreed to hire me. I understand that Midwest Truck & Trailer is under no obligation to hire me as the result of accepting this completed application.

I have read and understand the above statements and agree to be bound by them if employed by Midwest Truck & Trailer.

Signature

Date