EMPLOYMENT APPLICATION

APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Cell	Social Security#		
License #	Exp Date	Date of Birth	
Place of Birth	Height	Weight	
Eye Color	Hair Color	Date Available	
Position Applied for			

Do you have CDL with PS	YES	NO	If no, do you want to train to get your CDL	YES	NO
Are you a citizen of the United States?	YES	NO	If no, are you authorized to work in the U.S.?	YES	NO
Have you ever worked for this company?	YES	NO	If so, when?		
Have you ever been convicted of a felony?	YES	NO	If yes, explain		

REFERENCES

Please list three professional references.

Full Name	Relationship
Company	Phone
Address	
Full Name	
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary $	Ending Salary $	
Responsibilities			
From To	Reason for Leaving		

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary $	Ending Salary $	
Responsibilities			
From To	Reason for Leaving		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. By signing, I will allow Cassidy Trans. to run a driver abstract to review my past driving history. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. Cost to obtain CDL with P & S endorsements will be repaid to Cassidy Trans. Inc. if my employment does not last one year. I give permission to Cassidy Trans. Inc. to deduct these cost from my paycheck. If cost cannot be paid from last paycheck I promise to repay Cassidy Trans. Inc. for cost (permit fees, DOT physicals and fingerprinting) of obtaining CDL with P & S.

Worker's comp is covered only if injury occurs during work hours of route. Personal use of company vehicle is not allowed. I authorize Cassidy Trans. Inc. to deduct all cost of vehicle personal use (gas and mileage) from paycheck.

If you choose to send the form back electronically, please type in your name starting with "/s/". Example: /s/ John Doe. This will act as a legal signature.

Signature	Date