

Application for Employment



Timmons Truck Center 

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify Timmons Truck Center.

Position(s) applied for _____ Date of application ____/____/____

Referral Source Advertisement Employee Relative Government Employment Agency
 Walk-in Private Employment Agency Other _____

Name of source (if applicable) _____

Name _____
LAST FIRST MIDDLE

Address _____
STREET CITY STATE ZIP CODE

Telephone # (____) _____ Mobile/Other Phone # (____) _____ Social Security # _____

If you are under 18, can you furnish a work permit if required? Yes No

If no, please explain _____

Have you ever applied for work with this company before Yes No If yes, when/where _____

Have you ever worked for this company before Yes No If yes, when/where _____

Reason for leaving _____ Name of last supervisor _____

Are you legally eligible for employment in this country? Yes No

If hired, when can you begin working? _____

Type of employment desired Full-Time Part-Time Temporary

Can you relocate if the job requires you to do so? Yes No

Can you travel if the job requires you to do so? Yes No

Can you meet the attendance requirements of the position? Yes No

Can you work overtime if the job requires you to do so? Yes No

Have you been convicted of a felony in the last seven (7) years? Yes No

If yes, please explain _____

CONVICTION MAY NOT NECESSARILY DISQUALIFY YOU FROM OBTAINING EMPLOYMENT. EACH CASE WILL BE CONSIDERED IN RELATION TO THE POSITION FOR WHICH YOU ARE APPLYING.

Driver's license number if driving is an essential job function _____ State _____

Employment History

Provide the following information for your last three employers beginning with the most recent. Explain any gaps in employment in the comments section below.

EMPLOYER	TELEPHONE	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
JOB TITLE	HOURLY RATE/SALARY			
	STARTING			
IMMEDIATE SUPERVISOR	\$	PER		
	HOURLY RATE/SALARY			
REASON FOR LEAVING	HOURLY RATE/SALARY			
	FINAL			
CAN WE CONTACT FOR A REFERENCE	\$	PER		
	HOURLY RATE/SALARY			

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REASON FOR LEAVING	HOURLY RATE/SALARY			
	FINAL			
CAN WE CONTACT FOR A REFERENCE	\$	PER		
	HOURLY RATE/SALARY			

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	HOURLY RATE/SALARY			
REASON FOR LEAVING	HOURLY RATE/SALARY			
	FINAL			
CAN WE CONTACT FOR A REFERENCE	\$	PER		
	HOURLY RATE/SALARY			

Educational Background

SCHOOL	YEARS COMPLETED	DEGREE/DIPLOMA	GPA /CLASS RANK	MAJOR	MINOR

References

List below three business/work references (not related to you) whom you have known at least one year.

NAME	TELEPHONE	YEARS KNOWN

Additional Information

List below professional, trade, business or other associations of which you are a member and any offices you hold.
EXCLUDE MEMBERSHIPS WHICH COULD REVEAL YOUR SEX, RACE, RELIGION, NATIONAL ORIGIN, COLOR, DISABILITY OR ANY OTHER PROTECTED STATUS.

ORGANIZATION	OFFICE HELD

List special accomplishments, publications, awards, etc.
EXCLUDE MEMBERSHIPS WHICH COULD REVEAL YOUR SEX, RACE, RELIGION, NATIONAL ORIGIN, COLOR, DISABILITY OR ANY OTHER PROTECTED STATUS.

List any special training, skills, licenses and/or certifications that may qualify you as being able to perform the functions of the position for which you are applying.

List additional information that you feel we should consider.

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be cause for cancellation of this application or immediate termination from the employer's service.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information I have provided on this application. I hereby release from liability the employer and its representatives for seeking, obtaining and using such information. I also release from liability any persons, corporations or organizations for releasing such information.

The employer does not unlawfully discriminate in employment, and no question on this application is used or the purpose of limiting or excusing any application from consideration for employment on a basis prohibited by local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application is not an agreement or contract for employment.

I understand it is the company's policy not to refuse employment opportunities to qualified individuals with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

By signing this application I agree that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____ Date ____ / ____ / ____
