

# DRIVER'S APPLICATION FOR EMPLOYMENT

## Excel Propane Company

APPLICANT INFORMATION							
Last Name		First		M.I.		Date	
Street Address				Date of Birth			
City			State			ZIP	
Phone #			Social Security #				

EMPLOYMENT DESIRED							
Position Applied for					Desired Wage	\$	
Date you can start				Are you employed now?			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?				
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain				

EDUCATION							
<b>High School</b>			City. State				
Number of Years Attended		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Subjects Studied		
<b>College</b>			City. State				
Number of Years Attended		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
<b>Trade School</b>			City. State				
Number of Years Attended		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		

REFERENCES							
<i>Please list three references.</i>							
<b>Name</b>				Relationship			
Company				Years Acquainted			
Address					Phone #		
<b>Name</b>				Relationship			
Company				Years Acquainted			
Address					Phone #		
<b>Name</b>				Relationship			
Company				Years Acquainted			
Address					Phone #		

**LIST ADDRESSES FOR PAST THREE YEARS IF DIFFERENT THAN CURENT ADDRESS ABOVE**

<b>Street Address</b>				
City		State		ZIP
<b>Street Address</b>				
City		State		ZIP
<b>Street Address</b>				
City		State		ZIP

**PREVIOUS EMPLOYMENT – LIST PAST 3 YEARS AND COMMERCIAL DRIVER EMPLOYMENT FOR PAST 10 YEARS**

*Starting with the most recent one first (Attach separate sheet of paper if needed)*

<b>Company</b>		Phone	( )
Address		Supervisor	
Job Title		Salary	\$ From To
Reason for Leaving			
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
<b>Company</b>		Phone	( )
Address		Supervisor	
Job Title		Salary	\$ From To
Reason for Leaving			
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
<b>Company</b>		Phone	( )
Address		Supervisor	
Job Title		Salary	\$ From To
Reason for Leaving			
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
<b>Company</b>		Phone	( )
Address		Supervisor	
Job Title		Salary	\$ From To
Reason for Leaving			
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	

**ACCIDENT RECORD FOR PAST 3 YEARS**

Dates (most recent first)	Nature of Accident (Head-on, Rear-end, Overturn)	Fatalities	Injuries

**TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS**

Dates (most recent first)	Location	Charge	Penalty

**DRIVER LICENSES – YOUR CURRENT DRIVER LICENSE AND ANY HELD IN PAST 3 YEARS MUST BE SHOWN**

State	License #	Class / Type	Expiration Date

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
B. Has any license, permit or privilege ever been suspended or revoked?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
C. Have you ever been disqualified for violations of the Federal Motor Carrier Safety Regulations?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If you answered "Yes" to A, B, C, attach a statement giving details.		
List states operated in for the last five years:		

**DRIVING EXPERIENCE**

Class of Equipment	Type of Equipment (Van, Tank, Flat)	Dates		Approx miles
		From	To	
Straight Truck				
Tractor and Semi Trailer				
Other				

**EQUAL EMPLOYMENT OPPORTUNITY STATEMENT**

Prospective applicants will receive consideration without discrimination because of race, color, religion, sex, national origin, age, marital or veteran status, non-job-related medical conditions or handicaps, or any other legally-protected status.

**DISCLAIMER AND SIGNATURE**

It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to applicant's record, whether same is of record or not, and I release employers and persons named herein from all liability for any damages on account of furnishing such information.

I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered a job, it will be conditioned on the results of a DOT physical and drug test.

It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-50B, I understand that this investigation may include an Investigative Consumer Report, including information regarding my character, general reputation, personal characteristics, and mode of living.

I understand that this application is not an employment contract and that, if hired, my employment and compensation can be terminated, with or without cause, at any time at the option of either the company or myself.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. 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 certify that I have read and understood all of the employment application and 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.

Signature		Date	
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