



PO Box 2009 • Terre Haute, IN 47802
Phone: 812-232-3475 • Fax: 812-234-2658

DRIVER APPLICATION FOR EMPLOYMENT (Equal Opportunity Employer)

Date of Application _____

NAME _____

ADDRESS _____

TELEPHONE (____) _____ SOCIAL SECURITY # _____

DATE AVAILABLE FOR EMPLOYMENT _____

Date of Birth (Required for Commercial Drivers) _____ Can you provide proof of age? _____

Have you ever been employed by this company? Yes No

Are you employed now? Yes No

If not, how long since leaving last employment? _____

May we contact your present employer? Yes No

If yes, give name: _____

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? Yes No

Type of work desired: _____

If applying for a position where driving is required – Do you have a valid driver's license in this state? Yes No

License # _____

Can you perform the essential functions of the job(s) for which you are applying? Yes No

Are you available to work FULL-TIME PART-TIME OVER-TIME

Have you been convicted of a felony? Yes No

(Please note that a "Yes" answer will not bar you from consideration for employment.)

If yes, please explain: _____

This company is an equal employment opportunity employer. All applicants will be considered without regard to age, race, national origin, religion, gender, physical or mental disability, or other protected classifications in accordance with applicable federal and state equal employment opportunity laws. This company will strive to accommodate any physical or mental limitations of employees or applicants in order to accomplish the essential functions of the job.

EDUCATION

School Name & Address	<u>Elementary</u>	<u>Secondary</u>	<u>College</u>	<u>Graduate</u>
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Course of Study	_____	_____	_____	_____

SPECIAL SKILLS, QUALIFICATIONS AND CONSIDERATIONS:

Summarize special skills and qualifications, volunteer activities, military experience, employment or other activities related to the job you are seeking:

REFERENCES:

List three (3) non-relatives who are familiar with your qualifications and actual work history and ability.

<u>Name</u>	<u>Occupation/Relationship</u>	<u>Years Known</u>	<u>Telephone</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

All driver applicants to drive in interstate commerce must provide the following information on all employers during the preceding 3 years. List complete mailing address, street number, city, state and zip code.

Applicants to drive a commercial motor vehicle (including vehicles having a GVWR of 26,001 lbs. or more, vehicles designed to transport 15 or more passengers, or any size vehicle used to transport hazardous materials in a quantity requiring placarding) in intrastate or interstate commerce shall also provide an additional 7 years' information on those employers for whom the applicant operated such vehicle.

(NOTE: List employers in reverse order starting with the most recent. Add another sheet as necessary.)

EMPLOYMENT EXPERIENCE

Employer _____ Supervisor's Name _____
Address _____ Your Job Position _____
Telephone Number _____ Employed from _____ (mo/yr) to _____ (mo/yr)
Salary: Starting/Ending _____ Duties _____
What did you like most about your job? _____

Reason for Leaving: _____

Employer _____ Supervisor's Name _____
Address _____ Your Job Position _____
Telephone Number _____ Employed from _____ (mo/yr) to _____ (mo/yr)
Salary: Starting/Ending _____ Duties _____
What did you like most about your job? _____

Reason for Leaving: _____

Employer _____ Supervisor's Name _____
Address _____ Your Job Position _____
Telephone Number _____ Employed from _____ (mo/yr) to _____ (mo/yr)
Salary: Starting/Ending _____ Duties _____
What did you like most about your job? _____

Reason for Leaving: _____

Employer _____ Supervisor's Name _____
Address _____ Your Job Position _____
Telephone Number _____ Employed from _____ (mo/yr) to _____ (mo/yr)
Salary: Starting/Ending _____ Duties _____
What did you like most about your job? _____

Reason for Leaving: _____

Experience and Qualifications – Driver

Driver Licenses	State	License No.	Type	Expiration Date

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 (If None, Write None)

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

List states operated in for 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) if none, write none

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) If none, write none

(Attach sheet if more space is needed)

Location	Date	Charge	Penalty

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. By signing below, I authorize **Spence Banks, Inc.** to investigate all statements contained in this employment application as they may deem necessary in arriving at an employment decision. I understand that any false information provided by me will likely result in a refusal to hire or immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications.

If hired I will be responsible for familiarizing myself with all rules and regulations of **SPENCE BANKS, INC.** as they presently exist or are later modified. *If hired, I understand my employment can be terminated, at the discretion of SPENCE BANKS, INC. or at my option, without notice, at any time and for any reason.*

I also understand that no representative of **SPENCE BANKS, INC.** has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a current written agreement signed by the President.

I understand this application is not an offer of employment and no promises or representations of employment have been made to me at this time.

I have read, understand, and agree with the above.

Signature of Applicant

Date

This application is valid for only ninety (90) days from the date I signed. If I want to be considered for job openings more than ninety (90) days from date signed, I will submit a new application.