

## **Employment Application**

Various Federal, State and local laws prohibit discrimination based on race, color, sex, religion, national origin, ancestry, age disability or marital status. Long Life Fleet is an equal opportunity employer and your response to any question will not be used as a basis for discrimination, but will be judged on its relevance to the position you are seeking.

PERSO	nal informati	ON			DATE	1 1
Name (Las	st)	First	M.I.	Social Security I	No.	Drivers Lic. #
Home Add	dress		City	State	Zip	
Home Telephone Business Telephone			May we	contact you at wo	rk?	
			☐ Yes ☐ No			
Position Applying For Date Av			Available /	Are you interested in (check all that apply)  ☐ Full-time ☐ Part-time ☐ Temporary ☐ Summer		
Location Interested in: Are you willing to relocate?		e?	Are you willing to	travel?	Is so, what %?	
Yes \_\_No				☐ Yes ☐ N		%
How were	you referred to Long Life I	Fleet?		If you're under 18, please state date of birth (no one under 16 may be hired) / /		
EMPLO	YMENT HISTOR	Y ecent position. Account for any tim	oo during this ported tha	t valuworo unomployod by	estating the nature of	at vour activities
	tact your present employer?		employer(s)?  Yes	□ No	stating the nature t	n your activities.
DATES	NAME & ADDRI	ESS OF EMPLOYER	POSITION & SUPERVISOR	MAJOR DUTIES	SALARY OR WAGES	REASON FOR LEAVING
From:	Name		Job Title		Starting	
То:	Address/Phone#		Supervisor		Final	
			- -			
From:	Name		Job Title		Starting	
То:	Address/Phone#		Supervisor		Final	
From:	Name		Job Title		Starting	
101111			302 11110		- Ottarting	
Го:	Address/Phone#		Supervisor		Final	
U.S. MI	 Litary Service					
			cal Specialization		Rank Attained	
LEGAL	-	•		'		
Are you a U	.S. citizen or do you have a l	egal right & necessary document verified as required by the Immigr				
Were you ev Reason for d		any? ☐ Yes ☐ No If yes,	give name of company	/(ies)		
Have you ev		other than a minor traffic violation If yes, please explain offense		iminal record will not autor	matically disqualify	you from the job for which
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Type of School	Name and Locati	on of School	Degree/Area of Study	# Years Attended	Graduated (check one)
	Name	Address	of Study	Allended	(CHECK OHE)
High School	City State Zip				
	Name Address				
Technical School	City State Zip				
	Name Address				
College					
	City	State Zip			
	Name	Address			
Other	City	State Zip			
SPECIAL S	KILLS			·	
PC Software		Specialized Equipment	Oth	er	
REFERENC Business reference					
Business references: (do not list relative Name		Address	Work Phone	Title	Yrs. Known
	EAD CAREFU	L LLY prization, an investigation may be mad	le whereby information	I n is obtained rega	rding my character
	,	reputation, educational background, d	,	O O	0 3
In the event of	f emplovment. I u	nderstand that false or misleading info	rmation given in my a	pplication or interv	view(s) may result in
		and, also, that I am required to abide I			
Lunderstand a	and agree that if e	mployed, the employment will be "at w	vill" That is either Lo	r Lona Life Fleet r	may end the employ-
ment relations	hip at any time, fo	or any reason, or for no reason. I unde	erstand that receipt of	this application by	Long Life Fleet doe
not imply emp	loyment and that	this application and/or any other Long	Life Fleet documents	are not contracts	s of employment.
					' /
APPLICANT'S	SIGNATURE	DATE SIGNED			
Office Use O	nly			]	
Salary/Wage	\$	Annual / Hourly			
Location		Department			
Ctant Data		Term Date:/	,	LOI	VG \

Attach any notes to become part of permanent file!