



P.O. Box 910550
St. George, UT 84791
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Application for Employment

Position applying for: _____ Date of Application _____ Phone Number (____) _____

Name _____ Social Security Number _____
First Middle Last

*Current Address _____
Street City State Zip How Long

*If you lived at another address within the last three years please list below. Use another sheet if necessary.

Street City State Zip How Long

Street City State Zip How Long

Street City State Zip How Long

Do you have the legal right to work in the United States? _____

Date of Birth ____/____/____ (MM/DD/YY) Can you provide proof of your age? _____

Have you worked for this company or any of its partners before? _____ Dates: From _____ To _____
Month/Year Month/Year

Which one(s): _____ Rate of Pay _____ Position _____

Have you ever worked for DATS Trucking under another name? ___ If so, under what name? _____

Reason for leaving: _____

Are you currently employed? _____ If not, how long since leaving last employment? _____

Who referred you? _____ Rate of pay expected? _____

Is there any reason you might be unable to perform the functions of he job for which you have applied? _____

If yes, please explain: _____

Have you ever been convicted of a felony? _____ If yes, please explain on another piece of paper. Conviction of a crime is not an automatic bar to employment. All circumstances will be considered.

Education

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College: 1 2 3 4

Last school attended _____
Name Address

Dock Experience & Qualifications

List types of dock experience and number of years of each _____

List of dock equipment you can operate (lift truck, pallet jack, etc.) _____

List of courses or training in dock work _____

Employment Record

Please provide 10 years of work history. Start with last or current position, including military experience, and work back. (Attach a separate sheet of paper if necessary)

Employer	From Mo. Yr.	To Mo. Yr.
Address	Position Held	
City State Zip	Salary/Wage	
Contact Phone Number	Reason For Leaving	

Employer	From Mo. Yr.	To Mo. Yr.
Address	Position Held	
City State Zip	Salary/Wage	
Contact Phone Number	Reason For Leaving	

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Address	Position Held	
City State Zip	Salary/Wage	
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The U.S. Dept. of Transportation requires that driver applications show all employment for the past 3 years. They must also show commercial driver employment for the seven years immediately preceding this three-year period. (§391.21(b)(10),(11))

Driver Experience & Qualification (Answer these questions only if applying for a driver position)

Licenses					
Drivers Licenses held in the last 3 years must be shown	State	License No.	Class	Endorsement(s)	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 _____
- C. Have you ever been disqualified for violations of the Federal Motor Carrier Safety Regulations? Yes _____ No _____
- D. Have you ever tested positive or refused a DOT drug or alcohol pre-employment test within the past two years from an employer who did not hire you? Yes _____ No _____
- E. Have you ever been convicted of a felony? Yes _____ No _____

If the answers to A, B, C, D or E, is 'Yes', give details? _____

Driving Experience				
Class of Equipment	Type of Equipment (Van, Tank, Flat, Etc.)	Date		Approximate Total Miles
		From	To	
Straight Truck				
Tractor and Semi-Trailer				
Twin Trailers -LCV's				
Other				

List States operated in during last five years _____

List special courses or training completed that will help you as a driver _____

List driving awards and who awards were presented by _____

Accident Review –Past 3 Years			
Dates	Nature of Accident (Head-On, Rear-End, Overturn, Etc.)	Fatalities	Injuries
Last Accident			
Next Previous			
Next Previous			

(Please attach a separate sheet of paper if more space is necessary)

Traffic Convictions and Forfeitures-Past 3 Years (other than parking violations)			
Location	Date	Charge	Penalty

Clerical Experience & Qualifications (Clerical Applicants Only)

List courses and training for office work _____

Indicate training and experience in the following:	Formal Training (Check)	Years of Experience	Area	Formal Training (Check)	Years of Experience
Typing (wpm)			Dictating Machine		
Shorthand (wpm)			Bookkeeping Machine		
Billing			Switchboard Equipment (List Type)		
Filing			Tabulator		
Computers -Operating Systems			Computers -Software Applications		
Word Processing Equipment			Accounting		
Copier			OS & D Administration		
Cashier			Interline Administration		
Claims			Dispatcher		

Rates (indicate Tariffs you have worked with): _____

Personal References

Name _____ Address _____ Phone _____
 Name _____ Address _____ Phone _____
 Name _____ Address _____ Phone _____

Applicant Must Read & Sign

I certify that I have read and understand all of this employment application. It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other 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 physical examination and drug test.

I further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the employer and for no other reason.

It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include an investigative Consumer Report, including information regarding my character, general reputation, personal characteristics, and mode of living.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I also understand that misrepresentation or omission of information or facts may result in my rejection or dismissal.

If hired, I agree to abide by all the rules and policies of the employer.

This certifies that I completed this application, and that entries on it and information in it are true and complete to the best of my knowledge.

_____ Date

_____ Applicant Signature

FOR OFFICE USE ONLY-DO NOT WRITE IN THIS SPACE

Applicant Hired? Yes _____ No _____
 (If not hired, summary report of reasons should be placed in file) Date of Birth _____ (Month/Day/Year)
 Date Employed: _____ Terminal Employed at: _____
 Department: _____ Classification: _____

IN CASE OF EMERGENCY, NOTIFY: _____ Phone (_____) _____
 Address: _____

THIS SECTION TO BE FILLED OUT BY RESPONSIBLE OFFICER OR COMPANY REPRESENTATIVE

	Superior	Good	Fair	Below Average	Poor	Written Record on File
1. Application						
2. Interview						
3. Physical Exam *						
4. Past Employment						
5. Written Exam						
6. Road Test *						
7. Policy & Traffic Record						

* Driver Applicants only

Signature of Interviewing Officer: _____ Date: _____

Transfers

From: _____	To: _____	From: _____	To: _____
Date: _____		Date: _____	
Reason for Transfer: _____		Reason for Transfer: _____	

Termination of Employment

Date Terminated: _____ Department Released From: _____

Dismissed _____ Voluntary Quit _____ Other (explain): _____

Termination Report Placed in File: _____ Supervisor _____ Supervisor _____