

Marlboro

TOWING

9587 Edison St. NE Alliance, OH 44601

330-935-2210

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Social Security No. _____ Desired Salary: _____

Date of Birth: _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Accident Record For Past 3 Years (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 (If none, write none)

Location	Date	Charge	Penalty

This Job Requires A Valid Driver's License

List Your Class: _____ Expiration Date: _____

Does Your License Require A Physical: YES NO If yes, Expiration Date: _____

Driver's License Number: _____ State: _____

Education

Level	Name & Location (City/ State)	Year Graduated
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High School: _____

College: _____

College: _____

Certifications: _____

Driving Experience

Class of Equipment	Type of Equipment	Dates	Approximate Number of Miles (Total)
Straight Truck			
Tractor and Semi-Trailer			
Tractor - Two Trailers			
Motorcoach / School Bus			
Tow Truck			
Other			
Other			

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?

YES

NO

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____

Date: _____