



EMPLOYMENT APPLICATION

Please fill out form completely for employment consideration.

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin or disability. We are an equal opportunity employer.

Personal Information

Date _____

Last Name First Middle Middle

Street Address Home Phone

City State/Zip Cell Phone

Email Address: _____

Are you over 18 years of age? Yes _____ No _____

Have you ever applied for employment with us? Yes _____ No _____ Year _____

Are you legally eligible for employment in the United States? Yes _____ No _____

When will you be able to work? _____

Are you employed now? Yes _____ No _____ If so, may we inquire of your present employer? Y / N

Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court? Yes _____ No _____

If Yes, describe in full. _____

Are there any reasons for which you might not be able to perform the job duties (with a reasonable accommodation)? Yes _____ No _____ If Yes, please explain _____

Drivers License# _____ State _____

Education	School Name and location of school	No. of Years	Did you graduate?	Course of study
Grammar School				
High School				
College				

Employment History

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

We may contact the employers listed above unless you indicate those you do not want us to contact.

Date Month/Year	Name, Address Phone and Number	Salary	Position	Reason for leaving

Do not contact:

Employer Number(s) _____

Reason _____

References

Give below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Years Acquainted
1.			
2.			
3.			

The information provided in this Application for Employment is true, correct and complete. If employed, any misstatements or omissions of fact on this application may result in my dismissal.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

If you decide to engage an investigative consumer reporting agency to report on my credit and personal history, I authorize you to do so.

If a report is obtained you must provide, at my request, the name and address of the agency so I may obtain from them the nature and substance of the information contained in the report.

Signature: _____ Date: _____

For Office Use

Interview by _____ Date _____

Remarks _____

Hired ____ Yes ____ No Position _____ Dept. _____ Start Date _____



Hot-Line Freight System, Inc.

W2197 County B

West Salem, WI 54669

(608) 486-1611

Fax (608) 486-1609

EMPLOYMENT REFERENCE CHECK

Applicant's Name _____

Social Security # _____ Other Name(s) Worked Under _____

Company Name _____ Position Held _____

Dates Employed: From _____ To _____

Company Phone # _____ Fax # _____

I have applied for a position with Hot-Line Freight System, Inc. and I authorize you to provide Hot-Line Freight System, Inc. and/or its subsidiaries with information concerning my employment, character, education background, and law enforcement record. I give my knowing and voluntary consent. I hereby release all entities and individuals including Hot-Line Freight System, Inc. and its subsidiaries from any and all liability that may arise from supplying the information requested.

Signature: _____ Date: _____

TO BE COMPLETED BY REFERENCE:

Are the dates of employment given correct: _____

If not, give correct dates: From _____ To _____

Reason for leaving? _____

Would you rehire? Yes _____ No _____

Personal Evaluation	Excellent	Very Good	Satisfactory	Poor
Attendance				
Punctuality				
Quality of work				
Quantity of work				
Job Knowledge				
Initiative				
Attitude				

Additional Comments: _____

Company Contact: _____

Completed By: _____ Title: _____

Date: _____ Phone Number: _____

Please contact The Human Resource Department at the number above with any questions or concerns pertaining to this reference check. The completed document can be returned via the above fax number.