

APPLICATION FOR EMPLOYMENT

Thank you for your interest in becoming an employee of Capital Tractor, Inc. Capital Tractor, Inc is an equal opportunity employer. All applicants will be considered without regard to age, race, nationality, religion, disability, sex or other protected status in accordance with applicable federal and state equal employment opportunity laws. Title I of the Americans with Disabilities Act of 1990 requires an employer to provide reasonable accommodation to qualified individuals with disabilities who are employees or applicants for employment, unless to do so would cause undue hardship.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields legibly.

Name:	Date:			
Address:				
E-mail Address:				
Home Telephone:	Mobile Telephone:			
Are you legally eligible to work in the U.S?Yes	No			
Driver's License # and Issuing State:				
DOT # (if applicable for position applying for. If not, list	N/A):			
Are you at least 18 years or older? (If no, you may be re	equired to provide authorization to work.)YesN	10		
Have you ever been terminated from employment or a	usked to resign by an employer?YesNo			
Are you currently employed?YesNo	May we contact your present employer?Yes	_No		
If yes, give name of current supervisor:	·			
Please provide company name and telephone number:				
Are you able to perform the essential functions of the j	job for which you are applying, with or without a reasonab	le		

accommodation? ____Yes ____No

EMPLOYMENT DESIRED

Date available for employment:	Hourly rate/salary	Hourly rate/salary desired:		
Position desired:				
EMPLOYMENT HISTORY Include your last seven (operation. Attach a separate sheet if necessary.	7) years of employment history, i	ncluding commercial	motor vehicle	
Employer:	Supervisor:	Supervisor:		
Address:	Position:			
Phone #:	Employed from	to	(Mo/Yr)	
Salary: (Start/End)	Duties:			
What did you like most about your job:				
Reason for Leaving:				
Employer:				
Address:	Position:			
Phone #:	Employed from	to	(Mo/Yr)	
Salary: (Start/End)	Duties:			
What did you like most about your job:				
Reason for Leaving:				
Employer:	Supervisor:			
Address:	Position:			
Phone #:	Employed from	to	(Mo/Yr)	
Salary: (Start/End)	Duties:			
What did you like most about your job:				
Reason for Leaving:				

Do you have any special skills, experience and/or training that would enhance your ability to perform the position

applied for? If yes, explain. _____

EDUCATION					
	School Name		Grades Comple	eted	Course of Study
High School:					
College:					
Graduate:					
REFERENCES					
Give the name	s of three (3) non-relativ	es who are famili	ar with your qu	alifications, work	history and ability.
Name		Occupation/Rel	ationship	Years Known	Phone #
REFERRAL SOU	IRCE				
How did you he	ear about us?				
Do you know a	nyone who works for ou	r company?Y	′esNo		
If yes, who?					
<u>Please read ca</u>	refully before signing.				

I certify that all answers and statements I have made on this application are true and complete without omissions. By signing below, I authorize Capital Tractor to investigate all statements contained in this employment application as they may deem necessary in arriving at an employment decision. I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require a completed I-9 Form. I understand that falsification of any kind provided above may result in disgualification of employment or immediate termination if 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. 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.

Signature: _____ Date: _____