

American DC Limousine

Drivers License #: _____ State: _____
 Expiration Date: ___/___/___
 CDL: Yes ___ No ___ MVR Check: ___/___/___

Employment Application

Applicant Information

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

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Phone: () _____ Cell Phone: () _____

Date Available: _____ Social Security No.: _____ - - - - -
In accordance with 391.21 DOB: ___/___/___

Position Applied for: _____ Desired Salary \$ _____

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 so, when? _____

Have you ever been convicted of a felony? YES NO If Applying as a Driver are you over the age of 25? Yes/ No
 If yes, explain: _____ Referred by: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Driving Experience

CLASS OF EQUIPMENT	TYPE OF EQUIPMENT (Handicap lift, etc.)	DATES		APPROX. NO. OF MILES/YEARS DRIVING VEHICLE
		FROM	TO	
Sedan, Non CDL				
Limousine/ Small Passenger Van, Non CDL:				
Passenger Van(s) Small Bus CDL License:				
Coach Bus/Other CDL License:				

What is your accident record for the past three years? Please list if there are any accidents that are still pending. (Attach additional sheets as needed).

	DATE(s)	LOCATION CITY,STATE	NATURE OF ACCIDENT (REAR-END, ETC.)	ANY INJURIES OR FATALITIES?
LAST ACCIDENT				
NEXT PREVIOUS				
NEXT PREVIOUS				

- A. Have you ever been denied a license, permit or privilege to operate a motor vehicle?
Yes ____ No ____
- B. Has your license, permit or privilege ever been suspended or revoked? Yes ___ No ___
If yes why? _____
- C. Please provide a copy of your **Driver's license** and a **DMV** records check taken within the last 30 days.

Please list any traffic convictions or forfeitures for the past three years. Please list any tickets that are still pending (Other than parking violations).

LOCATION	DATE	CHARGE	PENALTY

For availability please place an "X" for day available and underneath the day place a time. If you are available all day that day please place just an "X" for that day.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Day(s) Available							
Time Available							

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

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

***Non CDL* Previous Employment for the last (3) years**

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

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain:

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered. I understand that this employer does not unlawfully discriminate in employment and no question is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law. If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the right to terminate my employment at any time with or without cause and with or without prior notice, except required by law. This application does not constitute an agreement or contract for employment for any specified period or duration. I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 in this regard.

Signature: _____ Date: ___/___/___