

# APPLICATION FOR EMPLOYMENT

## Ray Walker Trucking Co., Inc.

PO Box 469      Piedmont, SC 29673      864-277-5234      Beverly Flavell

We offer equal employment opportunities to all persons without regard to race, color, religion, age, marital or veterans status, sex, national origin, or the presence of a non-job related medical condition or handicap or any other legally protected status.

We are an at-will employer, either the employer or the employee may end the employment relationship at any time and for any or no reason.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Position applied for: \_\_\_\_\_ How soon can you report to work? \_\_\_\_\_

Type of employment     Full Time     Part Time                      Rate of pay expected \_\_\_\_\_

Do you have restrictions on the hours or days you can work? \_\_\_\_\_

Have you applied for a job with us before?     Yes     No              Have you ever worked for us before?     Yes     No

Have you ever been convicted of a crime?     Yes     No    If so, list date, court, and place where offense occurred.

Have you ever been discharged or requested to resign from a position?     Yes     No              If yes, please explain

How much time have you lost from work in the last year? \_\_\_\_\_

Can you produce documented proof of your eligibility for employment in the United States?     Yes     No

Driver's license number: \_\_\_\_\_ State: \_\_\_\_\_ Class: \_\_\_\_\_

Has your license ever been suspended or revoked?     Yes     No

If yes, Date: \_\_\_\_\_ State: \_\_\_\_\_ Explain \_\_\_\_\_

Have you ever been disqualified from driving by any employer for a drug or alcohol policy violation?     Yes     No

"I certify this information is true, and I authorize the use of any information to verify my statements. I authorize my past employers to answer all questions concerning my ability, character, previous employment record, and drug and alcohol test results, thus releasing them from any liability or damages on account of having provided such information."

"I understand that nothing in this application, or in an interview, or in a road test is intended to create an employment contract between Ray Walker Trucking and myself for either employment or any benefits. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that Ray Walker Trucking has the same right."

"I agree to submit to a DOT physical and a DOT drug screen when requested, and I understand my becoming employed and/or my continued employment are subject to successfully passing these, in accordance with company policy."

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

# Prior Work Record:

Please list all employers for the past ten (10) years. Start with most recent employer and complete in full.

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Position: \_\_\_\_\_ If driver, type of vehicle: \_\_\_\_\_  
Reason left: \_\_\_\_\_ Rate of pay: \_\_\_\_\_  
Date hired: \_\_\_\_\_ Date left: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Position: \_\_\_\_\_ If driver, type of vehicle: \_\_\_\_\_  
Reason left: \_\_\_\_\_ Rate of pay: \_\_\_\_\_  
Date hired: \_\_\_\_\_ Date left: \_\_\_\_\_

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Address: \_\_\_\_\_  
Position: \_\_\_\_\_ If driver, type of vehicle: \_\_\_\_\_  
Reason left: \_\_\_\_\_ Rate of pay: \_\_\_\_\_  
Date hired: \_\_\_\_\_ Date left: \_\_\_\_\_

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Address: \_\_\_\_\_  
Position: \_\_\_\_\_ If driver, type of vehicle: \_\_\_\_\_  
Reason left: \_\_\_\_\_ Rate of pay: \_\_\_\_\_  
Date hired: \_\_\_\_\_ Date left: \_\_\_\_\_

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Position: \_\_\_\_\_ If driver, type of vehicle: \_\_\_\_\_  
Reason left: \_\_\_\_\_ Rate of pay: \_\_\_\_\_  
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