

## **APPLICATION FOR EMPLOYMENT**

Truck & Trailer Specialties, Inc. is an equal opportunity employer. Truck & Trailer Specialties, Inc. does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

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

		Applica	ant Information					
Full Name:				Date:				
	Last	First		<i>M.I.</i>				
Address:								
	Street Address				Apartment/Unit #			
	City			State	ZIP Code			
Phone:			E-mail					
Date Availab	le:			Desired Salary:	\$			
Position App	lied for:							
•	orized to work in the United S				YES NO			
If hired: You would be required to present evidence of your U.S. Citizenship or proof of your legal right to work in the United States. This employer participates in E-Verify and will provide the federal government with your Form I-9 information to confirm that you are authorized to work in the U.S.								
Have you ev	er worked for this company?	YES N						
If hired, wou	Ild you have transportation to	o/from work?	[] Y or [] N					
Are you ove	r the age of 18? (If no, you r	nay be requi	red to provide autho	prization to work) []	Y or [ ] N			
	e to perform the essential fur accommodation? [] Y or [] I		e job for which you a	are applying, either w	vith / without			
lf no, descri	be the functions that cannot	be performe	d					

(Note: Company complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)

Have you ever been convicted of a felony: [] Y [] N If Yes, explain:								
Driver's Licens	se: Operator	_ CDL CDL Type		Endors	ements	Expiration		
Education								
High School:		Address	s:					
From:	То:		YES	NO □				
College:		Address	8:					
From:	To:	Did you graduate	YES ?	NO □	Degree:			
Other:		Address	s:					
From:	To:	Did you graduate?	YES ?	NO □	Degree:			
		Refei	rences	•				
Please list thre	ee professional ref	erences.						
Full Name:					Relat	ionship:		
Company:						Phone:		
E-mail:								
Full Name:		Relationship:						
Company:						Phone:		
E-mail:								
Full Name:					Relat	ionship:		
Company:						Phone:		
E-mail:								
		Previous E	Employ	/ment				
Company:						Phone:		
Address:					Sup	ervisor:		
Job Title:		Starting S	Salary: <u>\$</u>		E	nding Salary: <mark>\$</mark>		
Responsibilitie	s:							
From:	To: Reason for Leaving:							
May we contac	ct your previous sup	ervisor for a reference?	YES					

Company: _				Phone: Supervisor:				
Job Title:	Starting S							
Responsibiliti	es:							
From:	То:	Reason	for Leaving:					
May we conta	act your previous supervisor for a reference?	YES	NO □					
A ddrooo.				Phone: Supervisor:				
-	Starting S							
Responsibilities:								
From: _	То:	Reason	for Leaving:					
May we conta	act your previous supervisor for a reference?	YES						
Disclaimer and Signature								

## Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Truck & Trailer Specialties, Inc. to hire me. If I am hired, I understand that either Truck & Trailer Specialties, Inc. or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Truck & Trailer Specialties, Inc. has the authority to make any assurance to the contrary.

I attest with my signature below that I have given Truck & Trailer Specialties, Inc. true and complete information on this application. No requested information has been concealed. I authorize Truck & Trailer Specialties, Inc. to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date \_\_\_\_\_ Signature \_\_\_\_\_

## THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.