



APPLICATION FOR EMPLOYMENT

This company does not discriminate on the basis of race, religion, national origin, sex, age, marital or veteran status, disability or medical condition, or any other legally protected status.

PLEASE PRINT AND SUBMIT WITH ALL SECTIONS COMPLETED

Include a legible copy of a valid driver's license

Preliminary Information

Last name		Middle Name	
First Name		Nickname	
Street address		City/State/Zip	
Telephone number		Social Security Number	
Email address		Cell phone number	
How long at the above address?	If less than 5 years, list previous addresses		

Address	City/State	How long?

What position you are applying for?	
What are your salary requirements?	

Hours/period of time available to work (check one or more)

- Full time
 Part time
 Winter
 Summer
 Temporary

Are you over 17 years of age? Yes No

(Certain positions are, by dot regulations, not available to persons under 21 years of age.)

Have you ever been convicted of a felony? Yes (give details below) No

(Such a conviction will not necessarily disqualify you for the position you are applying for.)

Do you have any relatives currently working for the company? Yes (Name & Location) _____ No

Are you a citizen of the USA? Yes No (Check One)

Green Card Work Permit Other _____

Education (High School Diploma or Ged Required)

High school - Name and Address	Years Completed	Diploma/Ged
Technical school - Name and Address	Course of Study	Degree
College - Name and Address	Course of Study	Degree

List specialized training apprenticeships, study courses, seminars, industry classes etc.

Future Education Plans	Where?		When?	
	What Courses?			



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Employment History

List ALL previous employers including military services. If you need additional space, use a separate sheet of paper.
 Please list your present or most recent job first. If presently employed, may we contact your employer? Yes No

Employer		
Dates Employed	From	
	To	
Address		
Wage/Salary	Starting	
	Final	
Telephone Number		
Job Title		Supervisor
What did you like Most about this position?		
What did you like Least about this position?		
Major Responsibilities or Job Functions		

Employer		
Dates Employed	From	
	To	
Address		
Wage/Salary	Starting	
	Final	
Telephone Number		
Job Title		Supervisor
What did you like Most about this position?		
What did you like Least about this position?		
Major Responsibilities or Job Functions		

Employer		
Dates Employed	From	
	To	
Address		
Wage/Salary	Starting	
	Final	
Telephone Number		
Job Title		Supervisor
What did you like Most about this position?		
What did you like Least about this position?		
Major Responsibilities or Job Functions		



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References

Please list any references you feel would be able to give information pertinent to this position. Please indicate whether you prefer these references to be contacted before or after your interview(s) with this company. Do not include previous employers or family members.

Name		Telephone	
Address			

Name		Telephone	
Address			

Name		Telephone	
Address			

Driving Record

This section must be completed by all driving applicants. All driving applicants must be 21 years or over, and meet all requirements prescribed by the Department of Transportation.

DRIVER'S LICENSES

State	License No.	Type	Exp. Date

DRIVING EXPERIENCE

Straight Truck	From		Approx. no. Miles (Total)	
	To			
Tractor & Trailer	From		Approx. no. Miles (Total)	
	To			
Automobile	From		Approx. no. Miles (Total)	
	To			
Other	From		Approx. no. Miles (Total)	
	To			
Safe Driving Awards When/From Whom				

DRIVING RECORD FOR PAST THREE YEARS *(attach separate sheet, if necessary)*

Please list any vehicular accidents, traffic convictions, and/or license forfeitures.

DATE	NATURE OF ACCIDENT/CHARGE	LOCATION/CITY	FATALITIES/INJURIES	CHARGE/PENALTY



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IMPORTANT NOTE TO APPLICANT: Do not answer this question unless you have been informed about the requirements of the job for which you are applying.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities in such a job or occupation is available upon request. Yes No

PRE EMPLOYMENT STATEMENT

IF NOT SIGNED, THIS APPLICATION CANNOT BE CONSIDERED.

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision, including an investigative consumer report.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applicants are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer, that as a condition of my employment, I will be required to sign a Confidentiality and Non-Solicitation Agreement or, if hired for a management level position, a Confidentiality, Goodwill, and Non-Solicitation Agreement, and that I will be subject to the Employer's pre-employment and random drug testing policy.

Signature of Applicant

Date

This employment application will remain active for three months.



SUBSTANCE ABUSE TEST CONSENT AND RELEASE BY EMPLOYEE

I, _____, hereby consent to administration of drug and/or alcohol testing at the request of Hometown/HisWay partners, Inc. without further consent by me. I consent to the collection of test samples through urine, blood, breath and saliva by Collectors selected by Hometown/HisWay partners, Inc., to the analysis of such samples by laboratories and medical providers selected by Hometown/HisWay partners, Inc. and by any medical providers which provide care or treatment to me for any reason.

I authorize such laboratories and medical providers to release all information pertaining to such testing, including test results, to Hometown/HisWay partners, Inc.

I release such laboratories, medical providers, Hometown/HisWay partners, Inc. and all of their respective employees and agents from all liability relating to such testing and test results and from all liability relating to the release of testing information and results as authorized herein.

I understand that my refusal to undergo drug and/or alcohol testing will result in disciplinary action up to and including termination of employment. I further understand that the results of any drug and/or alcohol test, or my refusal to submit to a drug and/or alcohol test, may affect my eligibility for workers compensation and benefits under Chapters 4121 and 4123 of the Ohio Revised Code.

A copy of this Consent and Release may be used in place of the original.

Date _____

Employee Signature _____

Employee Printed Name _____

Witness Signature _____

Witness Printed Name _____



AUTHORIZATION TO OBTAIN CONSUMER REPORT

I hereby authorize the Company to procure consumer reports as it deems appropriate. I further authorize the release of this information by any party or agency. If hired, this authorization shall remain on file and shall serve as ongoing authority for the company to procure consumer reports at any time during my period of employment.

Print Name _____

Social Security Number _____

Applicants Signature _____

Date _____

THIS DISCLOSURE AND AUTHORIZATION IS MADE IN COMPLIANCE WITH THE FAIR CREDIT REPORTING ACT.



A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - A person has taken adverse action against you because of information in your credit report;
 - You are the victim of identity theft and place a fraud alert in your file;
 - Your file contains inaccurate information as a result of fraud;
 - You are on public assistance;
 - You are unemployed but expect to apply for employment within 60 days.
- In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on the information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.



States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS	CONTACT
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 Phone: 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 Phone: 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 Phone: 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 Phone: 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 Phone: 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 Phone: 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 Phone: 202-366-1306
Activities subject to the Packers and Stockyards Act, 21921	Department of Agriculture Office of Deputy Administrator -- GIPSA Washington, DC 20250 Phone: 202-720-7051