

EMPLOYMENT APPLICATION

WHEATLEY TRUCK SERVICE, INC.

1719 Progress Way - Clarksville, IN 47129
Phone (812) 283-4123 or Fax (812) 285-9013

PERSONAL DATA

Name:

Current address:

City:

State:

ZIP Code:

Previous address:

City:

State:

ZIP Code:

Are you at least 18 years of age: Yes_____ No_____

What position are you seeking:

What days/hours are you available:

Are there specific times you cannot work:

Can you perform the duties of the job you are applying for: Yes_____ No_____

When can you begin work:

Approximate pay expected:

Have you been employed by this company before: Yes_____ No_____

EDUCATION

Check diploma/degree received: _____ High School Diploma/GED _____ Associate/Bachelor/Master (circle one)

List below any vocational courses or certificates, specialized training apprenticeships or skills that will help you qualify for the job you are seeking:

EMPLOYMENT HISTORY

Current/Present Employer:

Employer address:

How long?

City:

State:

ZIP Code:

Phone:

E-mail:

Fax:

Position:

Supervisor:

Start Date:

End Date:

Reason for leaving:

Start Salary:

End Salary:

Description of work performed:

Next Employer:

Employer address:

How long?

City:

State:

ZIP Code:

Phone:

E-mail:

Fax:

Position:

Supervisor:

Start Date:

End Date:

Reason for leaving:

Start Salary:

End Salary:

Description of work performed:

| | | | |
|---|-------------|---------------------|-----------|
| Next Employer: | | | |
| Employer address: | | | How long? |
| City: | | State: | ZIP Code: |
| Phone: | E-mail: | | Fax: |
| Position: | | Supervisor: | |
| Start Date: | End Date: | Reason for leaving: | |
| Start Salary: | End Salary: | | |
| Description of work performed: | | | |
| | | | |
| PERSONAL REFERENCES | | | |
| 1. Name: | | Phone: | |
| Address: | | | |
| 2. Name: | | Phone: | |
| Address: | | | |
| 3. Name: | | Phone: | |
| Address: | | | |
| ABOUT THIS COMPANY | | | |
| Wheatley Truck Service, Inc. is an equal opportunity employer. The company does not discriminate against any applicant or any employee because of such individual's race, color, religion, sex, age, national origin or disability. | | | |
| OTHER | | | |
| Have you ever worked under a different name: Yes ____ No ____ | | If so, what name: | |
| Have you ever been convicted of a felony or a misdemeanor which has not been expunged? | | Yes _____ No _____ | |
| If yes, please provide details: | | | |
| | | | |
| Please review your answers to all questions and then read and sign the following: | | | |
| I hereby certify that the information supplied in this application is complete and correct. I understand that any omission or misstatement can be grounds for either the company refusing to hire me or terminating my employment if I have already been hired. I hereby consent to the company verifying the information furnished and hereby release all persons who furnish information to the company in connection with such verification. | | | |
| Signature of applicant | | | Date |