



An Equal Opportunity Employer. We comply with all applicable state and federal civil rights and equal employment laws and regulations

PERSONAL INFORMATION									
LAST NAME		FIRST NAME		MIDDLE	SOCIAL SECURITY NUMBER				
PRESENT ADDRESS		CITY	STATE	ZIP	TELEPHONE NUMBER				
PERMANENT ADDRESS		CITY	STATE	ZIP	EMAIL				
POSITION APPLIED FOR		SITE LOCATION APPLIED FOR			PAY EXPECTED				
					\$				
HOW WERE YOU REFERRED TO THIS FACILITY?		ARE YOU 18 YEARS OR OLDER?			DATE AVAILABLE FOR WORK				
INTERNET	RADIO	FRIEND	YES	NO					
RELATIVES, FRIENDS OR ACQUAINTANCES EMPLOYED BY TATMAN'S TOWING?					SHIFT PREFERENCE				
YES	NO	NAME & DEPARTMENT:			DAYS	EVENINGS	NIGHTS	WEEKEND	
HAVE YOU EVER BEEN EMPLOYED BY TATMAN'S TOWING?					WOULD BE WILLING TO WORK:				
YES	NO	IF YES, WHEN:			ANY	SPLIT			
ARE YOU A U.S. CITIZEN OR AN ALIEN LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES?					DAY	WEEKEND			
YES	NO				NIGHT	OTHER:			
HAVE YOU EVER BEEN CONVICTED OF A CRIME? (INCLUDING MISDEMEANOR TRAFFIC VIOLATIONS) <small>A conviction does not automatically disqualify you from employment. Applicants are not obligated to disclose sealed or expunged record of arrest or conviction.</small>					SWING				
YES	NO	IF YES, PLEASE EXPLAIN:			ROTATING				
DATE OF CONVICTION:					YOU ARE APPLYING FOR				
IF NO, HAVE YOU EVER PLEAD ANYTHING OTHER THAN NOT GUILTY TO A CRIME?					FULL TIME				PART TIME
YES	NO								
FOR REFERENCE PURPOSES, IF YOU WERE KNOWN BY A DIFFERENT NAME(S), PLEASE INDICATE THE NAME(S)									

EDUCATION / SKILLS								
SCHOOL	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	CHECK LAST YEAR COMPLETED				GRADUATED	DIPLOMA / DEGREE
HIGH SCHOOL			1	2	3	4	YES	
							NO	
COLLEGE			1	2	3	4	YES	
							NO	
COLLEGE			1	2	3	4	YES	
							NO	
CH<9F fCH<9F GD97-5 @7 CI FG9 Gz-B7 @ 89 GD97-5 @A-@H5 FMHF5-B-B; L								
							TYPING APPROXIMATE WORD-PER-MINUTE (WPM)	COMPUTER EXPERIENCE
							YES	NO

SKILLS AND QUALIFICATIONS
TYPES OF COMPUTERS, SOFTWARE, AND OTHER EQUIPMENT YOU ARE QUALIFIED TO OPERATE OR REPAIR
PROFESSIONAL LICENSES, CERTIFICATIONS OR REGISTRATIONS:
ADDITIONAL SKILLS, INCLUDING SUPERVISION SKILLS, OTHER LANGUAGES OR INFORMATION REGARDING THE CAREER/OCCUPATION YOU WISH TO BRING TO THE EMPLOYER'S ATTENTION

DRIVER'S LICENSE			
DRIVER'S LICENSE MAY BE REQUIRED FOR SOME POSITIONS. IF YOU ARE APPLYING FOR A POSITION THAT WOULD REQUIRE A DRIVER'S LICENSE, PLEASE COMPLETE THE FOLLOWING.			
DRIVER'S LICENCE: YES	NO	ENDORSEMENTS	.....HAZARDOUS MATERIAL
7 @ GG. ....7	.....6	.....5-F 6 F5 ? 9 G	... PASSENGERS
			... TANKERS
			... G7 < CC @ 6 I G
			... 8 CI 6 @ # F-D @ HF 5 @ FG

## PREVIOUS EXPERIENCE

LIST NAME, ADDRESS, AND PHONE NUMBER OF PREVIOUS EMPLOYERS WITH THE MOST RECENT EMPLOYER FIRST

JOB TITLE	FROM (MO/YR)	TO (MO/YR)	IMMEDIATE SUPERVISOR	LAST PAY

EMPLOYER NAME	TELEPHONE NUMBER

ADDRESS	CITY	STATE

RESPONSIBILITIES

REASON FOR LEAVING

JOB TITLE	FROM (MO/YR)	TO (MO/YR)	IMMEDIATE SUPERVISOR	LAST PAY

EMPLOYER NAME	TELEPHONE NUMBER

ADDRESS	CITY	STATE

RESPONSIBILITIES

REASON FOR LEAVING

JOB TITLE	FROM (MO/YR)	TO (MO/YR)	IMMEDIATE SUPERVISOR	LAST PAY

EMPLOYER NAME	TELEPHONE NUMBER

ADDRESS	CITY	STATE

RESPONSIBILITIES

REASON FOR LEAVING

PLEASE LIST THE EMPLOYERS YOU DO NOT GIVE US PERMISSION TO CONTACT, AND THE REASON WHY.

EMPLOYER NAME	REASONING

EMPLOYER NAME	REASONING

EMPLOYER NAME	REASONING

CAN WE RUN A DETAILED EMPLOYMENT CHECK, INCLUDING BUT NOT LIMITED TO A CHECK, WITH YOUR PREVIOUS EMPLOYERS?

YES    NO

PLEASE SIGN BELOW TO AUTHORIZE REFERENCE CHECK	TODAY'S DATE

PLEASE IDENTIFY AND EXPLAIN ANY GAPS IN EMPLOYMENT

## OTHER EXPERIENCE

**DID YOU SERVE IN THE US ARMED SERVICES?**

YES  NO IF YES, WHAT BRANCH?

**BRIEFLY DESCRIBE DUTIES AND SKILLS ACQUIRED THROUGH MILITARY SERVICE: (INCLUDE DATES)**

**HAVE YOU VOLUNTEERED YOUR TIME OR SERVICES?**

YES  NO IF YES, WHERE?

## REFERENCES

**LIST AT LEAST 3 REFERENCES WHO ARE NOT RELATIVES OR EMPLOYERS. COWORKERS ARE ACCEPTABLE.**

NAME	RELATIONSHIP	COMPANY NAME & ADDRESS	TELEPHONE

## SIGNATURE

**CAREFULLY READ THIS SECTION PRIOR TO PROVIDING A SIGNATURE BELOW**

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. you may make a written request for information derived from the checking of your references.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms.

I understand and agree to the information shown above.

Equal Employment Opportunity: While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

SIGNATURE	TODAY'S DATE

## FOR OFFICE USE ONLY

**TO BE COMPLETED, IF EMPLOYED**

**IF APPLICANT IS 18 YEARS OLD, IS PROOF OF AGE ON FILE?**

YES  NO

STARTING DATE	ORIENTATION DATE	
POSITION / JOB TITLE	TYPE OF EMPLOYMENT	STARTING PAY
	<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME	\$
	SHIFT	DIFFERENTIAL
		\$
	OVERTIME	
<input type="checkbox"/> OVER 40 HOURS		