



P.O Box 959  
 Corsicana, Texas 75151  
 Number: 903-874-4946

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status or non-job related disability.

APPLICANT INFORMATION					
Last Name	First	M.I.	D.O.B.	Date	
Street Address			Apartment/Unit #		
City	State		ZIP		
Phone	E-mail Address				
Date Available		Social Security No.		Desired Salary	
Position Applied for					
Who referred you?					
Are you a citizen of the United States?	YES	NO	If no, are you authorized to work in the U.S.?	YES	NO
Have you ever worked for this company?	YES	NO	If so, when?		
Are you currently employed?	YES	NO			
Have you ever been convicted of a felony?	YES	NO	If yes, explain		

EDUCATION					
High School			Address		
From	To	Did you graduate?	YES	NO	Degree
College			Address		
From	To	Did you graduate?	YES	NO	Degree
Other			Address		
From	To	Did you graduate?	YES	NO	Degree

EXPERIENCE AND QUALIFICATIONS - DRIVER				
Driver Licenses	State	License Number	Type	Expiration Date

**ACCIDENT RECORD**

Please record any accidents for the past three years. If none, write NONE.

Dates	Nature of Accident	Fatalities	Injuries
Last Accident			
Next Previous			
Next Previous			

**TRAFFIC CONVICTIONS**

Traffic convictions and forfeitures for the past 3 years (other than parking violations). If none, write NONE.

Locations	Date	Charge	Penalty

Have you ever been denied a license, permit or privilege to operate a motor vehicle? \_\_\_\_\_

Has any license, permit or privilege ever been suspended or revoked? \_\_\_\_\_

**DRIVING EXPERIENCE**

Class of Equipment	Type Of Equipment	Dates from- Dates to	Approx. number of Miles
Straight Truck			
Tractor and Semi-trailer			
Tractor and Two Trailers			
Motor Coach – School Bus			
Other			

List States operated in for the last 5 years. \_\_\_\_\_

List any special equipment or technical materials you can work with (other than those already listed). \_\_\_\_\_

PREVIOUS EMPLOYMENT			
Company		Phone (      )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES	NO
Company		Phone (      )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES	NO
Company		Phone (      )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES	NO

MILITARY SERVICE	
Branch	From      To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
I authorize you to make such investigations and inquire of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employer, schools, health care providers and other persons from all liability in responding to inquiries and releasing information in connection with my application.	
Signature	Date