

SOUTHWINDS TRANSPORTATION

APPLICATION FOR EMPLOYMENT

As an EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER, SOUTHWINDS does not discriminate against applicants or employees because of their age, race, color, religion, national origin, sex (except where sex is a bona-fide occupational qualification) or on any other basis prohibited by law. Furthermore, SOUTHWINDS will not discriminate against any applicant or employee because he or she is mentally or physically handicapped, a disabled veteran, a veteran of the Vietnam era, or has a non-job related medical condition, provided he or she is qualified and meets the requirements established by SOUTHWINDS for the job.

PLEASE TYPE OR PRINT IN INK

DATE

NAME (Last) (First) (Middle)

SOCIAL SECURITY NUMBER

CURRENT ADDRESS (Street) (City) (State) (Zip Code)

PHONE NUMBER

() -

MAILING ADDRESS (Street) (City) (State) (Zip Code)
(If different from above)

ALTERNATE NUMBER

() -

ARE YOU OVER THE AGE OF 18? Yes No

TYPE OF POSITION DESIRED

POSITION APPLIED FOR:

Full time Part time Summer Temporary Other

SALARY EXPECTED

DATE AVAILABLE TO WORK

HOW WERE YOU REFERRED TO SOUTHWINDS?

DO YOU HAVE EVIDENCE OF AUTHORIZATION TO WORK IN THE U.S. TO PRESENT IF A JOB OFFER IS MADE?

Yes No

DO YOU WISH TO IDENTIFY YOURSELF TO THE COMPANY AS HANDICAPPED OF A DISABLED PERSON? Yes No
IF YES, EXPLAIN:

ARE YOU WILLING TO TAKE A PHYSICAL EXAM AT OUR EXPENSE IF THE NATURE OF THE JOB REQUIRES ONE?

Yes No

HAVE YOU EVER BEEN CONVICTED OF A CRIME? Yes No

IF YES, EXPLAIN: (WHERE) (WHEN) (CHARGE) (SENTENCE)

(Disclosure of a criminal record will not necessarily disqualify you for employment. Each conviction will be evaluated on its own merits with respect to time, circumstances and seriousness, in relation to the job for which you are applying.)

RECORD OF EDUCATION

NAME AND ADDRESS OF SCHOOL	DATES ATTENDED		GRADUATED		TYPE OF DEGREE/DIPLOMA RECEIVED OR EXPECTED	MAJOR/MINOR FIELDS OF STUDY
	FROM	TO	YES	NO		
	MO/YR	MO/YR				
HIGH SCHOOL (LAST ATTENDED)						
COLLEGE/ UNIVERSITIES						
GRADUATE SCHOOL						
OTHER (Business, Technical, Secretarial, etc.)						

HAVE YOU EVER BELONGED TO A CLUB, ORGANIZATION, SOCIETY, OR PROFESSIONAL GROUP WHICH HAS A DIRECT BEARING UPON YOUR QUALIFICATIONS FOR THE JOB WHICH YOU ARE SEEKING?

DO YOU HAVE ANY HOBBIES OR INTERESTS WHICH HAVE A DIRECT BEARING ON THE JOB FOR WHICH YOU ARE APPLYING?

DO YOU POSSESS A VALID CURRENT DRIVER'S LICENSE (ONLY FOR JOBS REQUIRING DRIVING A VEHICLE)?
 Yes No

DRIVER'S LICENSE NUMBER AND STATE:

MILITARY SERVICE RECORD

HAVE YOU EVER BEEN A MEMBER OF THE ARMED FORCES OF THE UNITED STATES? Yes No
 IF YES, DID YOU DEVELOP ANY SPECIAL SKILLS OR ABILITIES WHICH DIRECTLY RELATE TO THE JOB FOR WHICH YOU ARE APPLYING?

EXPERIENCE
(Most Recent Experience First)

1. NAME AND ADDRESS OF EMPLOYER	STARTING POSITION		ENDING POSITION
	SALARY	REASON FOR LEAVING	NAME AND TITLE OF SUPERVISOR
FROM MO _____ YR _____	START	END	
TO MO _____ YR _____			
PHONE NUMBER () -			
2. NAME AND ADDRESS OF EMPLOYER	STARTING POSITION		ENDING POSITION
	SALARY	REASON FOR LEAVING	NAME AND TITLE OF SUPERVISOR
FROM MO _____ YR _____	START	END	
TO MO _____ YR _____			
PHONE NUMBER () -			
3. NAME AND ADDRESS OF EMPLOYER	STARTING POSITION		ENDING POSITION
	SALARY	REASON FOR LEAVING	NAME AND TITLE OF SUPERVISOR
FROM MO _____ YR _____	START	END	
TO MO _____ YR _____			
PHONE NUMBER () -			

MAY WE CONTACT THE EMPLOYERS LISTED ABOVE? Yes No

IF NO, INDICATE BY NUMBER WHICH ONE(S) YOU DO NOT WISH US TO CONTACT: _____

USE THE SPACES TO DESCRIBE ANY PREVIOUS WORK HISTORY AND/OR TO DETAIL PARTICULAR JOB RESPONSIBILITIES LISTED ABOVE INCLUDING ANY ADDITIONAL INFORMATION WHICH YOU FEEL MAY BE RELEVANT TO THE JOB FOR WHICH YOU ARE APPLYING.

I UNDERSTAND THAT NOTHING CONTAINED IN THIS EMPLOYMENT APPLICATION OR IN THE GRANTING OF AN INTERVIEW IS INTENDED TO CREATE AN EMPLOYMENT CONTRACT BETWEEN SOUTHWINDS TRANSPORTATION, AND ME FOR EITHER EMPLOYMENT OR FOR THE PROVIDING OF ANY BENEFIT. IF AN EMPLOYMENT RELATIONSHIP IS ESTABLISHED, I UNDERSTAND THAT MY EMPLOYMENT CAN BE TERMINATED, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE, AT THE OPTION OF EITHER SOUTHWINDS TRANSPORTATION OR MYSELF.

I HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND AND AGREE THAT ANY MISREPRESENTATION OR OMISSION OF FACTS IN MY APPLICATION MAY BE JUSTIFICATION FOR REFUSAL TO HIRE, OR TERMINATION OF EMPLOYMENT.

I FURTHER UNDERSTAND THAT AN INVESTIGATIVE REPORT MAY BE MADE AS TO MY CHARACTER AND GENERAL REPUTATION. I AUTHORIZE ALL PAST EMPLOYERS, SCHOOLS, PERSONS, AND ORGANIZATIONS HAVING RELEVANT INFORMATION OR KNOWLEDGE TO PROVIDE IT TO SOUTHWINDS TRANSPORTATION OR ITS DULY AUTHORIZED REPRESENTATIVE FOR ITS USE IN DECIDING WHETHER OR NOT TO OFFER ME EMPLOYMENT AND SPECIFICALLY WAIVE ANY REQUIRED WRITTEN NOTIFICATION. I HEREBY RELEASE EMPLOYERS, SCHOOLS, PERSONS AND ORGANIZATIONS FROM ALL LIABILITY IN RESPONDING TO INQUIRIES IN CONNECTION WITH MY APPLICATION. UPON WRITTEN REQUEST BY ME, WITHIN A REASONABLE PERIOD OF TIME, SOUTHWINDS TRANSPORTATION WILL MAKE AVAILABLE TO ME THE NATURE AND SCOPE OF ALL REPORTS OF EVERY TYPE OBTAINED.

IN SIGNING THIS FORM, I CERTIFY THAT I UNDERSTAND ALL OF THE QUESTIONS AND STATEMENTS IN THIS APPLICATION.

SIGNATURE OF APPLICANT

DATE

FOR PERSONNEL USE ONLY

DATE APPLICATION RECEIVED

REFERRAL SOURCE

INTERVIEWED BY

DEPARTMENT

REFERENCE CHECK COMPLETED (DATE, AND BY WHOM)

DISPOSITION AND REASON