

**A-Line Iron & Metals
1500 David Street
Waterloo, IA 50703**

Driver's Application for Employment

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, veteran status, non-job related disability, or any other protected group status.

Personal Information:

Name: _____

Date of Application: _____

Permanent Address: _____

Phone Number: _____

Alt. Phone Number: _____

Do you have a legal right to work in the United States: Yes No

If hired, can you provide proof of age? Yes No

Have you worked for A-Line Iron & Metals before? Yes No

If yes, dates: **From:** **To:**

Reason for Leaving: _____

Are you now employed? **If not, how long since leaving last employment?**

Referred by: _____

Rate of pay expected? _____

Have you ever been convicted of a misdemeanor/felony? Yes No

If yes, please explain:

Is there any reason you might be unable to perform the functions of the job for which you have applied? Yes No

If yes, please explain:

Employment History

All driver applicants to drive in interstate commerce must provide the following information on all employers during the preceding 3 years. List complete mailing address, street number, city, state, and zip code.

Applicants to drive a commercial motor vehicle in intrastate or interstate commerce shall also provide an additional 7 years' information on those employers for whom the applicant operated such vehicle.

List employers in reverse order starting with the most recent. Add another sheet if necessary.

Employer		Date	
Name:		From:	To:
Address:		Position Held:	
City:	State:	Zip:	Salary/Wage:
Contact person:		Phone Number:	
Did you drive vehicle requiring a CDL? Yes No		Reason for Leaving:	
Employer		Date	
Name:		From:	To:
Address:		Position Held:	
City:	State:	Zip:	Salary/Wage:
Contact person:		Phone Number:	
Did you drive vehicle requiring a CDL? Yes No		Reason for Leaving:	
Employer		Date	
Name:		From:	To:
Address:		Position Held:	
City:	State:	Zip:	Salary/Wage:
Contact person:		Phone Number:	
Did you drive vehicle requiring a CDL? Yes No		Reason for Leaving:	
Employer		Date	
Name:		From:	To:
Address:		Position Held:	
City:	State:	Zip:	Salary/Wage:
Contact person:		Phone Number:	
Did you drive vehicle requiring a CDL? Yes No		Reason for Leaving:	
Employer		Date	
Name:		From:	To:
Address:		Position Held:	
City:	State:	Zip:	Salary/Wage:
Contact person:		Phone Number:	
Did you drive vehicle requiring a CDL? Yes No		Reason for Leaving:	

Includes vehicles having a GVWR of 26001lbs or more, vehicles designed to transport 15 or more passengers, or any size vehicle used to transport hazardous materials in a quantity requiring placarding.

List states operated in for last 5 years:

Show special courses or training that will help you as a driver:

Which safe driving awards do you hold and from whom?

Show any trucking, transportation or other experience that may help in your work for this company:

List courses and training other than shown elsewhere in this application:

List special equipment or technical materials you can work with (other than those already shown):

To be read and signed by Applicant

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. (Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended.)

I hereby release employers, schools, health care providers and other persons from all liability in responding to inquiries and releasing information in connection with my application. 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 Company. Further, I understand that my employment is "at will" meaning that it is for no definite period and may, regardless of the date of payment of wages, may be terminated at any time without notice.

Date: _____

Applicant Signature: _____

Interviewer Only

Interview Date: _____
Interviewer Notes: