KREILKAMP TRUCKING, INC.

EMPLOYMENT APPLICATION

Applicant No EmployeeNo.			
Phone	Fax	E	mail
Date Employed:			
Documents Rec	eived:		
Resume	Reference	e Checks	Interview Record

This company is an equal opportunity employer and fully subscribes to the principles of Equal Employment Opportunity. It is the policy of this company to provide employment, compensation and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status or disability, or any other basis prohibited by federal or state law. As an equal opportunity employer, this company intends to comply fully with all federal and state laws and the information requested on this application will not be used for any purpose prohibited by law. Disabled applicants may request any needed accommodation.

Name: First	Middle	Last	Date:	
Conicl Convrite #		Last		
	Drivers Li	icense #		State:
Present Address:				
Street		City	State	Zip
Email Address:				
Previous Address:				
Street		City	State	Zip
lome Phone:		Business Phone:		
	EMPLO	OYMENT DESIRED		
Position(s) applied for				
Full time	Part time			
f part time, what days and hours	are you available?	?		
Date available to start	available to start Salary requirement			
	PEF	RSONAL DATA		

COMPANY EXPERIENCE

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		PERIENCE		
Have you ever applied for employment with	us before:	Yes	No	
f yes, when (month and year)				
Have you been previously employed by this	company?	Yes	No	
f yes, when? li	n what capacity	?		
Who referred you to this Company? Employment Agency	Our Adve Friend/R	ertisement	Job S No One	Service
Names of friends or relatives employed by the	his company:			
Name		Rel	ationship	
Name		Rel	ationship	
Name	Relationship			
EDI	UCATIONAL B	ACKGROUNE)	
Name and Location <u>of School</u>	No./Years <u>Completed</u>	Did you <u>Graduate</u>	Course of <u>Study</u>	Degree
Elementary				
High School				
College				
Other Please check the skills for which you have r	eceived training			
Word Processing (WPM Software Packages: Database:				Calculator
List any special skills or qualifications which	you feel are rel	levant to the jo	bb for which you are	e applying:
	MILITA	RY		
Branch		From	To_	
What were your duties				
Did you receive any specialized training?		Yes	No	

EMPLOYMENT HISTORY Are you currently employed?____Yes ____No If not, when was your last date of employment? Please give accurate and complete information about your employment history. Start with present or most recent employer.

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1. Company Name	Telephone	No
Address		
Employed from to	/Name of Supervisor	
Hourly Pay: Start	Last	
Position and Responsibilities		
Reason for Leaving		
2. Company Name	Telephone	e No
Address		
Employed from / to	/Name of Supervisor	
Hourly Pay: Start	Last	
Position and Responsibilities		
Reason for Leaving		
3. Company Name		
Address to to		
Hourly Pay: Start		
Position and Responsibilities		
Reason for Leaving		
	REFERENCES	
we communicate with your present e	mployer?Yes	No
three people (no relatives) you have	worked with and whom we may cont	act for a reference.
e	Address	Phone
le	Address	Phone
ne	Address	Phone

BACKGROUND INVESTIGATION AUTHORIZATION FORM AND APPLICANT'S CERTIFICATION Please read the following statements carefully before you sign your name.

1. The Fair Credit Reporting Act (Amended 1997) requires that we inform you that a background investigation may be processed as part of our evaluation and qualification process. This investigation may include inquiries to gather legal information regarding your credit history, character, general reputation and other information pertinent to our evaluation of your background. This information, if gathered, is used to verify specific information that you provided on this application, resume or during the interview process. Upon your written request, within a reasonable time frame, the nature and scope of the report, if one is made, will be provided. In addition, if a written report is prepared, you have a right to request a copy of the report from the reporting agency. The information gathered in your background investigation will not be used in a discriminatory manner in the making of business decisions. I release this Company, past employers and other persons named herein from all liability for any damages on account of the furnishing of such information.

2. I hereby certify that the answers given by me to the above questions and statements are true and correct and hereby authorize you to contact any and all references, past or present employers, persons, schools, law enforcement agencies and any other sources of information which may be relevant to my application for employment. It is understood and agreed that any misrepresentation, false statement or omissions by me in this Application will be sufficient reason for rejection of my application or for dismissal at any time during my employment, without liability by this Company.

3. I further understand and agree that no representative of the Company has the authority to enter into any agreement for employment for any specified period of time and that this Company is not guaranteeing employment for anyone. No employment contract is created by virtue of my being hired by this Company and I recognize that if hired, I will be an employee at will.

4. I also understand and agree that this application will remain on file for sixty days for consideration. After sixty days, if I am still interested in a position with this Company, it will be necessary for me to complete a new application form.

5. I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

6. I further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the employer and for no other reason.

7. I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

8. If hired, I agree to abide by all the rules and policies of the employer, including its Mandatory Arbitration Policy, as a condition of my employment. This means that I will settle any and all claims, disputes or controversies arising out of or relating to my application for employment, employment and/or termination of employment exclusively by final and binding arbitration before a neutral Arbitrator.

THIS CERTIFIES THAT THIS APPLICATION WAS COMPLETED BY ME, THAT I AGREE WITH EACH OF THE STATEMENTS SET FORTH ABOVE, AND THAT ALL ENTRIES ON IT AND INFORMATION IN IT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Applicant Signature

Date