

NAME: FIRST-MIDDLE-LAST AS IT APPEARS ON YOUR SOCIAL SECURITY CARD

EMPLOYMENT, EDUCATION, AND MILITARY RECORD, ETC.: LIST PRESENT AND ALL PREVIOUS EMPLOYMENT, MILITARY SERVICE AND EDUCATIONAL EXPERIENCE DURING THE PAST TEN (10) YEARS. INCLUDE ALL PERIODS OF UNEMPLOYMENT LASTING SIX MONTHS OR MORE.

ARE YOU CURRENTLY EMPLOYED? YES
 NO

PRESENT EMPLOYER _____ MONTH/YEAR HIRED: _____ May we contact your current employer Yes No
COMPANY NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP: _____ COUNTY: _____
PHONE _____ SUPERVISOR NAME AND TITLE _____
TYPE OF BUSINESS _____
YOUR POSITION: _____
REASON FOR APPLYING WITH XL TOWING: _____ RATE OF PAY: _____

FORMER EMPLOYER _____ MONTH/YEAR HIRED: _____ Month/year separated: _____
COMPANY NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP: _____ COUNTY: _____
PHONE _____ SUPERVISOR NAME AND TITLE _____
TYPE OF BUSINESS _____
YOUR POSITION: _____
Reason for leaving Resigned Laid Off Discharged
Explain in detail _____

FORMER EMPLOYER _____ MONTH/YEAR HIRED: _____ Month/year separated: _____
COMPANY NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP: _____ COUNTY: _____
PHONE _____ SUPERVISOR NAME AND TITLE _____
TYPE OF BUSINESS _____
YOUR POSITION: _____
Reason for leaving Resigned Laid Off Discharged
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Explain in detail _____

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COMPANY NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP: _____ COUNTY: _____
PHONE _____ SUPERVISOR NAME AND TITLE _____
TYPE OF BUSINESS _____
YOUR POSITION: _____
Reason for leaving Resigned Laid Off Discharged
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CITY _____ STATE _____ ZIP: _____ COUNTY: _____
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Have you ever served in the U.S. Military or Armed Forces? Yes No If yes, what branch _____

Your primary specialty: _____ Rank at discharge: _____ Type of Discharge _____

California and Ohio applicants do not complete type of discharge information unless hired.

Have you ever been convicted of a crime involving alcohol or other controlled substance, arson, explosives, firearms, or other weapons, theft, dishonesty, threats, or violence under your current or any other name? Yes No If yes describe below

Note: A conviction will not necessarily prevent you from being offered employment.

Offense: _____

Date Convicted: _____ Penalty _____ Disposition _____

Occurred in the workplace: Yes No Name under which you were convicted _____

Offense: _____

Date Convicted: _____ Penalty _____ Disposition _____

Occurred in the workplace: Yes No Name under which you were convicted _____

Yard Workers Only

Do you have a commercial Drivers License (CDL)? Yes No Operators License Number _____ State _____ Expiration Date _____

Indicate years of experience in each category shown.	Lift Truck - electric	Lift Truck - gas	Freight Handler	OTHER	Checker	OTHER
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Indicate any other related work experience:

Garage Applicants Only

Have you had Auto Shop Experience Yes No No of Years _____ Have you had Truck Stop Experience Yes No Years Gas _____ Years Diesel _____ Show Your Area(s) of Specialization Below:

Equipment	Training		Experience		Equipment	Training		Experience		Equipment	Training		Experience	
	X	YRS.	X	YRS		X	Yrs	X	Yrs		X	Yrs	X	Yrs
Wood Working					Body Work					Oxyacetylene Welder				
Sheet Metal					Elec & Ignition					Paint Spray Gun				
Clutch Rebuilding					Engine Rebuilding					Air Brakes				
Differential Rebuilding					Diesel Injection					Other:				
Transmission Rebuilding					Electric Welder					Other:				

Clerical and Administrative

Place a check next to all the skills or types of work in which you have had training or experience indicate the number of years training/experience for each skill/type of work.

Skill	Training		Experience		Skill	Training		Experience		Skill	Training		Experience	
	X	YRS.	X	YRS		X	Yrs	X	Yrs		X	Yrs	X	Yrs
Typing WPM					Dispatch					Cashier				
Computer Word Processing					Computer Dispatch									
Computer Spread Sheet					Accounts Payable									
					Accounts Receivable									

LIST THE COMPUTER PROGRAMS AND EQUIPMENT WITH WHICH YOU ARE FAMILIAR:

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Date of Birth

DRIVER APPLICATION ONLY

State number of years driving experience in each category			List States You have driven in regularly	
Type of Vehicle	Years Experience			Other
	Gas	Diesel		
Straight Truck				
Tow Truck				
Roll-back				
Light duty				
Medium Duty				
Heavy Duty				
Tractor Trailer				
Double				
Single				
Triple				

List unexpired personal and Commercial Drivers Licenses or Permits

License Number	State	Date Issued		Type
		Issued	Expires	

List All Current Endorsements:

Indicate any awards you have received for safe driving and from whom:

Have you Ever had either your personal or Commercial Driver's License, permit or privileges denied, revoked or suspended?

Denied	Revoked	Suspended	Type of License	Date	State	For How Long	Reason

Have you been convicted or forfeited bond or collateral for violation of Motor Vehicle Laws or Ordinances (other than parking) During the past four (4) years prior to the date of this application.

Yes If Yes, complete below.
 No

Date	Nature of Violation	State	Penalty	Points

Have you ever had any Commercial Motor Vehicle Accidents

Yes List below all accidents you have had while operating any type of motor vehicle during the past five (5) years:
 No

Date	Nature of Accident	No. of Deaths	No. of Injuries	Vehicle Type	Where				Type
					on road	off road	prevent	non-prevent	

Have you ever refused OT be tested or tested positive on an alcohol or controlled substances test based on DOT Federal Motor Carrier Safety Regulations in the past 2 years? Yes No

If yes, can you provide Documentation from the substance abuse professional certifying that you have successful completed the prescribed treatment and have been recommended to a DOT regulated safety sensitive position as specified in the Federal Motor Carrier Safety Regulations? Yes No

Date of Last DOT Physical _____ IF KNOWN PLEASE PROVIDE

Did you qualify? Yes No
 Any Restrictions? Yes No

Doctor's Name _____
 Doctor's Address _____
 Doctor's Phone _____

Pursuant to the Provisions of paragraph (b) (10) of Section 391.21 of the Federal Motor Carrier Safety Regulations you are hereby Notified that if you are to be considered for employment by XL Towing, Inc. The information which you have provided in Accordance with this paragraph may be used, and your prior employers may be contacted for the purpose of investigating your background as required by Section 391.23.

Driver Applicant Signature _____ **Date** _____

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This Application will remain active for a period of three (3) months from the date of application.

All applicants must read and sign below:

It is agreed and understood that:

- 1 Completing this application will in no way assure that I will be employed.
- 2 This application was completed by me; all entries on it and information in it are true and complete to the best of my knowledge and any misrepresentations of information given shall be considered an act of dishonesty subjecting me to disqualification or discharge. I will furnish freely such information or documents that may be required to complete my employment file.
- 3 In consideration of my being considered for employment and or being employed I hereby agree to submit to physical examination and tests as may be required by the Company, and I do hereby (1) grant release and assign unto XL Towing & Storage, Inc. all rights, title and interest that I may subsequently acquire in all records and reports arising out of or in connection with said examinations and tests and (2) waive all rights to be advised on the content of said records and reports or to receive copies thereof, without prior written consent of XL Towing & Storage, Inc.
- 4 If employed, I agree (1) to conform to the rules and regulations of XL Towing & Storage, Inc. and (2) that my employment relationship with XL Towing & Storage, Inc. voluntarily and acknowledge that there is no specified length of employment. Accordingly, either I or the company can terminate the relationship at will, for any reason, with or without cause, at any time. I further understand and agree that consistent with this policy of at-will employment, the Company can discipline, demote or suspend me or decrease my pay as it sees fit, at its sole and absolute discretion, with or without advance warning. I understand that the terms and conditions herein set forth may only be modified by written agreement jointly executed by myself and the President of the Company.
- 5 If employed, I do hereby grant XL Towing & Storage, Inc., a nonexclusive right to practice any invention or device which I may conceive, develop or perfect using Company resources (such as time/or materials) during the period of my employment and to duplicate the invention or device as often as it may find occasion to do so in its business.

I hereby authorize XL Towing & Storage, Inc., or its agents (1) to investigate my previous record of employment to ascertain any and all information which may concern my record whether same is of record or not and I release my former employer from all liability for any damage on account of furnishing such information; (2) to investigate my previous scholastic record, and pursuant to the Family Educational Rights and Privacy Act of 1974, I authorize release of my education records by any educational agency or institution which I have attended; (3) to secure an investigative consumer report pursuant to Section 606 of the Fair Credit Reporting Act, including information as to my character, general reputation, personal characteristics and mode of living, whichever are applicable, provided that I may receive the name and address of the investigating consumer reporting agency from whom I may make a written request to receive full disclosure of any such investigative consumer report to receive same; and (4) to investigate my background and obtain such other information lawfully available to XL Towing & Storage, Inc. as it deems appropriate and I release the supplier of such information from all liability for any damage that may result from releasing such information.

Signature _____ **Date:** _____

XL Towing & Storage, Inc. Equal Employment Opportunity Policy

It is XL Towing & Storage, Inc's. policy to select the best-qualified person for each position in the company. The Company will not discriminate against any applicant because of race, creed, color, religion, sex, age, national origin, handicap, marital status or veteran status. This policy applies to all employment practices and personnel actions.

Recognizing the value of using human resources to their fullest, the Company has developed and instituted policies and procedures to ensure that it will (a) Recruit, hire, train and promote persons, in all job classifications without regard to age, race, color, religion, national origin, sex or physical or mental handicap, (b) Base decisions on employment to further the principal of equal employment opportunity (c) Base promotion decisions on principles of equal opportunity by imposing only valid requirements for promotional opportunities. (d) Administer all personnel actions such as compensation, benefits, transfers, layoffs, returns from layoffs, terminations, and Company sponsored programs without regard to age, race, color, religion, national origin, sex or physical or mental handicap. (e) Maintain a nondiscriminatory job environment free of sexually harassing conduct.

Applicant - Do Not Write Below This Line

Approvals (For XL Towing & Storage use only)

Title	Signature	Date	Title	Signature	Date
Hiring Manager			General Manager		

This application is active for three (3) months and may be extended for one additional three-month period. The extension is to complete processing if XL Towing & Storage, Inc. is unable to complete all elements of the hiring process within three (3) months. If extended, by your signature you authorize this application through enter date _____

Signed _____
Title _____