EMPLOYMENT APPLICATION



WE ARE AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

It is the policy of the Kenzie Transportation to afford equal employment opportunity to all qualified persons regardless of race, color, religious creed, national origin, age, military status, sexual orientation, disability, genetic information, gender identity, gender expression or gender unless based upon a bona fide occupational qualification.

PERSONAL INFORMATION

First Name	Middle Initial		Last Name		
Home Telephone Number	Personal Cell Phone Number		Ema	il Address	
Mailing Address					
Street		City	\$	State	Zip Code
Home Address - if different from mailing	ng address				
Street		City	5	State	Zip Code
Are you authorized to work in the U.S.	on an unrestricte	ed basis? YES	NO		
Are you 18 years or older?		YES YES	NO]	
Who referred you?					
 Current Employee Name Employment Agency Newspaper advertisement Other: 					

DRIVING RECORDS HISTORY					
Position Applied For	How soon can you start if a job offer is made?				
How long as you had your license?					
Have you worked for the 3DR transportation? NO YES Dates:	Starting salary desired				
Are you available for full time work? NO YES	Are you available NO for part time work? YES				
In addition to your work history, what other experiences, skills or qualifications would qualify you for this work?					

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EDUCATION							
Name of School	City	State	Main Course of Study	Did you Graduate	Degree	Years Attended (Dates)	
List any additional education or training							

PROFESSIONAL REFERENCES (not personal) List 3 people not related to you who can comment on your work performance.							
Name	Address	Occupation Telephone Num		Years Acquainted			

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EMPLOYMENT HISTORY					
Are you employed now? Yes	No				
Company Name		Telephone		May we contac	rt? Yes No
Street Address	City		State		Zip Code
Job Title	I		Supervisor		
Specific Duties					
Dates Employed From:	To:				
Reason for Leaving			1		
Company Name		Telephone		May we contac	t? Yes No
Street Address	City		State		Zip Code
Job Title	I		Supervisor		
Specific Duties					
Dates Employed From:	To:				
Reason for Leaving			1		
Company Name		Telephone		May we contac	et? Yes No
Street Address	City		State		Zip Code
Job Title			Supervisor		
Specific Duties					
Dates Employed From:	To:				
Reason for Leaving					

Use additional pages if necessary to include all employment.



PRE-EMPLOYMENT PHYSICAL & DRUG SCREENING NOTICE

PLEASE READ BEFORE SIGNING

If an offer of employment is made to you, the Kenzie Transportation may specify that it is contingent upon the results of a medical exam. I freely and voluntarily agree to submit to a pre-employment physical and/or drug screen, as it relates to the requirements of a specific job, as part of my pre-employment application to the Kenzie Transportation. I understand that either refusal to submit to such screening or failure to qualify according to the minimum standards established by the Kenzie Transportation for this screening may disqualify me from further consideration for employment. Further, I understand that any positive drug test results will be communicated in a confidential manner.

I hereby acknowledge that I have read in full and understand the above statements.

Signature of Applicant

Date

Printed Name