



400 13th Street  
Albany, MN 56307  
Ph: 320-845-4500/Fax: 1-320-845-7245

### Application for Employment

Applicant: Read and sign before submitting this application.

The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

I understand that the information in this application will be used and that prior employers will be contacted for the purpose of investigating is required by 391.23 of the Federal Motor Carrier Safety Regulations.

\_\_\_\_\_  
Signature of Applicant Date Signed

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
(First) (Middle) (Last)

\*Emergency contact: Name/Relationship/Phone #: \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_  
(Street/P.O. Box)

\_\_\_\_\_  
(City) (State) (Zip)

How long residing at this residence? \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of DOT Physical \_\_\_\_/\_\_\_\_/\_\_\_\_

Job Applying for: Driver \_\_\_\_\_ Independent Contractors \_\_\_\_\_ Mechanic \_\_\_\_\_ Shop \_\_\_\_\_ Office \_\_\_\_\_

Drivers License No. \_\_\_\_\_ State \_\_\_\_\_ Type/Class \_\_\_\_\_

Has your license ever been suspended or revoked? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Is there any reason you might not be able to perform the functions of this job for which you have applied?

Including lifting in excess of 20 pounds on a daily basis. Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_



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**Personal References**

List three persons for references, other than family members, who have knowledge of your work habits.

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

**Employment Record for Past 3 Years**

*Last or Present Employer Name:* \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
May we contact your present employer for references? Yes \_\_\_\_\_ No \_\_\_\_\_

*Second Last Employer Name:* \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

*Third Last Employer Name:* \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

**Education Background**

Circle Highest Grade Completed: 1 2 3 4 5 6 7 8 High School: 1 2 3 4 College: 1 2 3 4

Last School Attended \_\_\_\_\_  
(Name) (Address)

Please list any additional information you feel might help us in choosing you as an employee. Why you over any other applicants?  
If you need more space feel free to add more pages, send any other information, job skills or resumes you may have.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_