COLE

Cole and Cole Trucking

929 Walnut Street McKeesport PA 15132 412-334-2146

Application for Employment

Cole and Cole Trucking, is an EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications, and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

<u>PLEASE PRINT</u>. Complete the <u>entire</u> application. You may attach a resume, but you must still complete all questions or your application will be deemed incomplete and may not be considered. Please fill out each box, do not just indicate "See Resume."

Name (Last, First, Middle):	Position Applying For:
Street Address:	City, State & Zip:
Date of Birth (Month/Date/Year):	Social Security Number:

Home Phone:	Work Phone:		Mobile/Alternate Phone:
Email Address:			
Are you eligible to work in the United States?		Yes No)

DRIVING EXPERIENCE AND QUALIFICATIONS

		G i i	F : : F		
Driver's License Class:	Driver's License/CDL Number:	State:	Expiration Date:		
Has your license ever been	revoked or suspended?	If YES, when was the date	e of forfeiture?		
Yes No					
Number of accidents in the	last 3 years?	Nature of accident: (Head-	on Rear-ended Unset etc.)		
i valificer of accidents in the	lust 5 years.	Tratale of accident. (Ifeau	on, Rear chaca, Opsei, cie.)		
Fatalities: Yes No	Injuries: Yes No				
Number of moving violatio	ns in last 3 years?				
6	je na se				
Convicted of a DWI/DUI?	Yes No	If YES, when were you convicted?			
Have you ever been convic	ted of a felony? Yes No	If YES, when were you co	onvicted?		
Total Truck Driving Experi	ence:	Type of Equipment: (Bus,	<u> </u>		
		Axle Truck, Tractor and Sem	i-Trailer, Tank, Van, etc.)		
vears mon	ths				

WORK EXPERIENCE

Please detail your <u>entire</u> work history. Begin with your <u>current</u> or most recent employer. If you held multiple positions with the same organization, detail each position separately. <u>Attach additional sheets if necessary</u>. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time military or volunteer commitments. **PLEASE DO NOT** complete this information with the notation "See Resume."

PLEASE NOTE: Cole and Cole Trucking LLC reserves the right to contact all current and former employers for reference information.

(DOT requires employment history for at least three (3) years and/or commercial driving experience for the past ten (10) years be shown)

List current or most recent employer first.

Dates Employed:			Position Held/Job Title:			
	Full time P	art-time				
From: To:						
	If part-time, # hrs./wl	K: 🗌				
Starting Salary:	Organization Name a	nd Address:				
	-					
Final Salary:						
Supervisor's Name:						
Supervisor s Mame.						
Sugarations's Titles						
Supervisor's Title.	Supervisor's Title:					
Supervisor's Phone #:						
Other Reference Name, Title and F	hone #:					
Primary duties:		Reason for Leavi	ng:			

Dates Employed:			Position Held/Job Title:		
	Full time 🗌 Pa	art-time			
From: To:					
	If part-time, # hrs./wk				
Starting Salary:	Organization Name as	nd Address:			
Final Salary:					
Supervisor's Name:					
Supervisor's Title:					
Supervisor's Phone #:					
Other Reference Name, Title and Phone #:					
Primary duties:		Reason for Leavin	ng:		

WORK EXPERIENCE CONTINUED:

Dates Employed:	Full time Pa	ut time	Position Held/Job Title:			
From: To:	If part-time, # hrs./wk:	rt-time				
Starting Salary:	Organization Name an					
Final Salary:						
Supervisor's Name:	Supervisor's Name:					
Supervisor's Title:						
Supervisor's Phone #:						
Other Reference Name, Title and Phone #:						
Primary duties:		Reason for Leavin	ng:			

EDUCATION

Name of School	City/State	Did you graduate?	If No, # of years left to graduate	If Yes, date of Graduation	Degree received	Major
High School:		Yes No				
GED:		☐Yes ☐ No				
Other Education:		Yes No				
Technical School:		Yes No				
College:		Yes No				
Other credentials/ skills/ licenses/ professional affiliations, etc., which are relevant to the job(s) for which you are applying.						

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize Cole and Cole Trucking. to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of Cole and Cole Trucking. serve at-will, and the employment relationship may be terminated at any time by either party, for any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a State security questionnaire and State loyalty oath, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first SIX MONTHS of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

Applicant Signature: _____

Date: _____