

Employment Application

Mayne Transportation

5120 Godown Road
Columbus, Oh 43220
Phone: 614-302-9536
Fax: 614-456-7721

EMPLOYEE INFORMATION

Name: _____
Last First Middle

Phone#: _____ Email: _____

Date of Birth: ____ / ____ / ____ Driver's License #: _____

Current Street Address: _____

City, State, Zip, County: _____

How long at this address? _____

EMPLOYEE INFORMATION

Position applying for: _____

Do you have any experience relating to this position? Yes ____ No ____

Briefly describe your experience: _____

Have you ever been involuntarily terminated or asked to resign from any employer? Yes ____ No ____

If yes, please explain: _____

Have you ever been convicted of, pleaded no contest to or found guilty of any crime? Yes ____ No ____

If yes, please explain: _____

Have you ever received a DUI or OMVI citation? Yes ____ No ____ If Yes, what month and year _____

List any skills you would like for us to know about: _____

Are you legally eligible for employment in the U.S? Yes ____ No ____

Are you a Veteran? Yes ____ No ____ If yes, any special training: _____

Do you have a High School Diploma or GED? Yes ____ No ____

Do you have a College Degree? Yes ____ No ____ Have you taken any College Courses? Yes ____ No ____

If yes to either name of College: _____

Emergency Contact Information

Name: _____ Relationship: _____

Address: _____

Phone#: _____ Email: _____

EMPLOYMENT HISTORY

List most recent employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here.

Employer name and address:	Position title/duties. Skills:	Start Date	End Date
		Reason for leaving	
Pay Rate:	Co. Phone:		
Employer name and address:	Position title/duties. Skills:	Start Date	End Date
		Reason for leaving	
Pay Rate:	Co. Phone:		
Employer name and address:	Position title/duties. Skills:	Start Date	End Date
		Reason for leaving	
Pay Rate:	Co. Phone:		

ACKNOWLEDGEMENT AND AUTHORIZATION

All applicants are evaluated without regard to race, color, religion, age, gender, nationality, marital or veteran status or the presence of a non-job-related handicap or any other legally protected status.

I certify that the information and statements made herein are true and complete. I understand that making false statements or eliminating information from this application could mean that I may not be considered for employment. Further, I understand that subsequent to employment should any of the information be found false or omitted, I can be subject to termination from employment on the basis alone.

My signature acknowledges that in conjunction with my application, promotion, or assignments at Mayne Transportation, the company reserves the right to investigate my background, character, general reputation, at any time before or during my employment. If my employment is declined based on information found in my background, I have the right to request a copy of said background information in writing.

Further, I understand that my signature serves as permission to conduct an annual background check in any Ohio county and no further paper work or signature is required from me by Mayne Transportation.

Additionally, I understand that Mayne Transportation has the right to amend and or discontinue all bonus or incentive plans, or change any of its programs, rules and or regulations at any time. I understand that Ohio is an At-Will employment state and that any offer of employment should not be considered a contract. The Ohio At-Will law provides both the employer and employee the right to conclude their relationship with or without cause, with or without notice.

I have read the Acknowledgement and Authorization clause and fully understand it. Yes _____ No _____

Applicate Signature: _____ Date: _____