

# MILLER of DENTON, Ltd.

*As an equal opportunity employer, our Company does not discriminate in hiring or employment on the basis of race, color, religion, creed, national origin, citizenship status, sex, sexual orientation, marital status, age, disability or veteran status. No question on the application is intended to secure information about these subjects.*

## APPLICATION FOR EMPLOYMENT

PERSONAL	Last Name			First	Middle	Date
	Street Address					Home Phone (     )
	City, State, Zip					Business Phone (     )
	Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No    If Yes: Month and Year _____ Location _____					Social Security No.
	Position Desired		Are you interested in:			Date of Birth
			<input type="checkbox"/> Full Time <input type="checkbox"/> Temporary <input type="checkbox"/> Part Time <input type="checkbox"/> Evening Shift <input type="checkbox"/> Day Shift			
	Are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No    If not, what hours can you work? _____					Pay Expected
	Are you legally eligible for employment in the United States?					Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Other special training or skills (languages, machine operation, etc.)					When will you be available to being work? _____
How did you learn of our organization?						

EDUCATION	SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	NO. OF YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
	College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	High				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Elementary				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Other				<input type="checkbox"/> Yes <input type="checkbox"/> No	

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS	
<i>(Exclude those which may disclose your race, color, religion or national origin)</i>	

# EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

<b>1</b>	Company Name	Telephone (      )
	Address	Employed (State Month and Year) From                      To
	Name of Supervisor	Weekly Pay Start                      Last
	State Job Title and Describe Your Work _____	Reason for Leaving

<b>2</b>	Company Name	Telephone (      )
	Address	Employed (State Month and Year) From                      To
	Name of Supervisor	Weekly Pay Start                      Last
	State Job Title and Describe Your Work _____	Reason for Leaving

<b>3</b>	Company Name	Telephone (      )
	Address	Employed (State Month and Year) From                      To
	Name of Supervisor	Weekly Pay Start                      Last
	State Job Title and Describe Your Work _____	Reason for Leaving

<b>4</b>	Company Name	Telephone (      )
	Address	Employed (State Month and Year) From                      To
	Name of Supervisor	Weekly Pay Start                      Last
	State Job Title and Describe Your Work _____	Reason for Leaving

<b>5</b>	Company Name	Telephone (      )
	Address	Employed (State Month and Year) From                      To
	Name of Supervisor	Weekly Pay Start                      Last
	State Job Title and Describe Your Work _____	Reason for Leaving

We may contact the employers listed above unless you indicate those you do not want us to contact.

### DO NOT CONTACT

Employer Number(s) \_\_\_\_\_ Reason \_\_\_\_\_  
\_\_\_\_\_

**REFERENCES: PLEASE LIST NAMES, RELATIONSHIP AND CONTACT INFO**


**DO NOT ANSWER QUESTION IN THIS SECTION UNLESS THE BOX IS CHECKED**

If the employer has checked the box next to the questions, the information requested is needed for a legally permissible reason, including, without limitation, national security considerations, a legitimate occupational qualification or business necessity. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits discrimination on the basis of age with respect to certain individuals. The laws of most States also prohibit some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status or physical or mental handicap or disability.

<input checked="" type="checkbox"/>	<b>What was your previous address?</b>		
<input checked="" type="checkbox"/>	<b>How long at previous address?</b> _____ Years	<input checked="" type="checkbox"/>	<b>How long at present address?</b> _____ Years
<input checked="" type="checkbox"/>	<b>Are you over 21 years of age?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If not, employment is subject to verification of minimum legal age.	<input checked="" type="checkbox"/>	<b>Sex</b> <input type="checkbox"/> Male <input type="checkbox"/> Female
<input checked="" type="checkbox"/>	<b>Have you ever been bonded?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No    If Yes, with what employers? _____		
<input checked="" type="checkbox"/>	<b>Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No    If Yes, describe in full.		
<input checked="" type="checkbox"/>	<b>General</b>		
	<b>Have You Served In the U.S. Armed Forces?</b>	<b>Branch</b>	<b>Dates</b>
			<b>From:                      To:</b>
	<b>Rank at Discharge</b>	<b>Type of Discharge</b>	

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The information provided in this Application of Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.  
I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.  
If you decide to engage an investigative consumer reporting agency to report on my credit and personal history I authorize you to do so. If a report is obtained you must provide, at my request, the name and address of the agency so I may obtain from them the nature and substance of the information contained in the report.

Date \_\_\_\_\_ Signature \_\_\_\_\_

## DRIVER SECTION

### DRIVER LICENSES

Do you have a valid driver's license?  Yes  No

State	License Number	Type	Expiration Date

### DRIVING EXPERIENCE

Class of Equipment	Type of Equipment (Van, tank, flat, etc.)	Dates		Approximate Number of Miles (Total)
		From	To	
Straight Truck				
Tractor & Trailer(s)				
Bus				
Other				

Safe Driving Awards You Now Hold and From Whom? \_\_\_\_\_

### ACCIDENT RECORD FOR PAST 3 YEARS (Attach Sheet if More Space is Needed)

Dates	Nature of Accident (Head-on, rear, upset, etc.)	Fatalities	Injuries

### TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS (Other Than Parking Violations)

Location (City & State)	Date	Charge	Penalty

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle?  Yes  No

B. Has any license, permit or privilege ever been suspended or revoked?  Yes  No

**IF THE ANSWER TO EITHER A OR B IS YES, ATTACH STATEMENT GIVING DETAILS**

## END OF APPLICATION

### INTERNAL USE ONLY

R E F E R E N C E  C H E C K	Employer	Person Contacted	Results
	1		
	2		
	3		
<b>INTERVIEWER NAME AND COMMENTS</b>			

## AUTHORIZATION FOR BACKGROUND CHECK

Last Name	First Name	Social Security #	Date of Birth	Driver's License # & issuing state
Street Address		City	State, Zip	Home Phone

I understand that, as a condition of my consideration for employment with Miller of Denton, Ltd or as a condition of my continued employment, Miller of Denton, Ltd may obtain a consumer report that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education background, social security verification, criminal and civil history, personal interviews, workers comp claims, motor vehicle/DMV records, any other public records and any other information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics and trustworthiness. I understand that this authorizes a pre-screening background investigation and will remain on file and serve as an ongoing authorization for Miller of Denton, Ltd (d.b.a. Miller of Denton, Wichita Beer, Southern Sales, and CDF Trucking) at any time during my affiliation or employment period.

I understand that Miller of Denton, Ltd will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

By initialing and dating below, I am giving my permission to Miller of Denton, Ltd or its agents to perform any of the aforementioned checks.

Date		Initials		By initialing and sending this document, you are agreeing to the terms and conditions.
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CA, MN, or OK RESIDENTS ONLY: As part of a routine background investigation, we may request a consumer credit report from a consumer credit reporting agency or one of its associated companies. If we do so and you wish them to send you a free copy of this consumer credit report, please check:

