

TUSCOLA COUNTY ROAD COMMISSION

EMPLOYMENT APPLICATION

ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION FOR EMPLOYMENT WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, HEIGHT, WEIGHT, MARITAL STATUS OR HANDICAP UNRELATED TO THEIR ABILITY TO PERFORM THE JOB FOR WHICH THEY APPLY.

PLEASE WRITE OR PRINT YOUR ANSWERS IN INK. IF SUFFICIENT SPACE IS NOT PROVIDED HERE FOR YOU TO GIVE COMPLETE ANSWERS TO CERTAIN QUESTIONS, OR IF YOU WISH TO GIVE PERTINENT INFORMATION NOT CALLED FOR, PLEASE ATTACH SUCH ADDITIONAL INFORMATION TO THIS APPLICATION.

1. Title of position or type of work for which you are making application

2. Name in full _____
Last First Middle

Present Address _____
Street City & State Zip Code

3. Social Security Number _____ Phone _____

4. If the above address is less than three years old, list all addresses for the past three years.

Street City & State Zip Code

Street City & State Zip Code

Street City & State Zip Code

(Attach Sheet If More Space Needed)

5. Are you 18 years of age or older? _____
(This question is asked only for the purpose of determining whether applicant is of legal age for employment.)

6. Are you a citizen of the United States? _____
If no, are you legally eligible for employment in the USA? _____

7. Have you served in the Armed Forces of the USA? _____
Branch of Service _____
From _____ to _____

8. Who should the Road Commission notify in case of an emergency?

Name

Address

(____) _____
Telephone

9. Do you have any friends or relatives who now or in the past have worked for the Road Commission? _____
If yes, give name(s) and dates employed.

10. The job for which you are applying may require work on Saturdays, Sundays and/or holidays and on an overtime basis. Are you willing to work such a schedule as a condition of your continued employment? _____

11. Have you ever been convicted of a felonious crime? _____
If yes, list details. _____

12. Are there any felony charges pending against you? _____
If yes, list details. _____

13. Please list educational background.

- (a) Did you graduate from high school? _____
If not, what was the grade level attained? _____
- (b) Did you attend college? _____ Did you graduate? _____
If not, how many earned credits? _____
- (c) Did you attend post graduate school? _____
Did you obtain a post graduate degree? _____
If not, how many post graduate hours earned? _____
- (d) Did you attend a trade or business school? _____
If so, what school? _____

14. Please list all special skills, work experience or training that you feel will qualify you for the position sought. _____

15. List all driver's licenses held in the past three years.

Driver's license number _____
State that issued driver's license _____
Date of expiration of driver's license _____
Does this license have a Commercial Driver's License (CDL)? _____ Group A _____
Group B _____
Group C _____

List all other endorsements on this license _____

Driver's license number _____
State that issued driver's license _____
Date of expiration of driver's license _____
Does this license have a Commercial Driver's License (CDL)? _____ Group A _____
Group B _____
Group C _____

List all other endorsements on this license _____

(Attach Sheet if More Space Needed)

16. Have you ever been denied a license permit or privilege to operate a motor vehicle? _____
If yes, give details, including state where denial occurred. _____

17. Has your license, permit or privilege to drive ever been suspended or revoked? _____
If yes, give details including dates, and state of suspension or revocation.

18. List all motor vehicle accidents in which you have been involved in the past three years.
Please specify the date of each accident, the nature of each accident and any fatalities or
personal injury incurred in each accident.

(Attach Sheet If More Space Needed)

19. List all violations of motor vehicle laws or ordinances (other than parking violations) for
which you were convicted, forfeited bond or collateral, or pled guilty or no contest to in
the past 3 years. _____

20. Have you ever been convicted of, or pled guilty to, or pled no contest to driving while
under the influence of alcohol or drugs or while visually impaired? _____
If yes, give details. _____

21. Have you ever been notified that you tested positive for an illegal drug, after being tested in accordance with any random or for cause drug testing policy of any previous employer, or after being tested as required by any federal or state law or regulation? _____

If the answer is yes, please explain, giving date of said positive test and location.

22. List names and addresses of all employers you have worked for during the past 10 years.

Last Employer:

Name _____

Address _____

Supervisor's Name _____

Position Held _____ From _____ to _____

Salary _____

Reason for Leaving _____

Second Last Employer:

Name _____

Address _____

Supervisor's Name _____

Position Held _____ From _____ to _____

Salary _____

Reason for Leaving _____

Third Last Employer:

Name _____

Address _____

Supervisor's Name _____

Position Held _____ From _____ to _____

Salary _____

Reason for Leaving _____

Fourth Last Employer:

Name _____

Address _____

Supervisor's Name _____

Position Held _____ From _____ to _____

Salary _____

Reason for Leaving _____

(Attach Sheet If More Space Needed)

23. List experience in the operation of motor vehicles, including the type of equipment.
(Such as buses, trucks, truck tractors, semi-trailers, full trailers, tankers, etc.)

Straight Truck _____ Date Operated From _____ To _____
Approximate Miles _____

Tractor & Semi-trailer _____ Date Operated From _____ To _____
Approximate Miles _____

Twin Trailers _____ Date Operated From _____ To _____
Approximate Miles _____

Tanker Trailer & Tractor _____ Date Operated From _____ To _____
Approximate Miles _____

(Attach Sheet If More Space Needed)

24. List the states you operated in for the last 5 years.

25. List special courses of training which you have completed that will help you as a driver.

26. List any safe driving awards you have earned.

REFERENCES

(Three individuals not related to you, whom you have known for at least one year)

	Name	Address & Telephone	Relationship	Years Acquainted
1.				
2.				
3.				
4.				

APPLICANT CERTIFICATION

1. **Drug Screen** – I understand and agree that prior to my final employment with the Tuscola County Road Commission I must submit to and pass a physical examination which will included a drug test. The physical examination will be performed by the Road Commission’s doctor at the Road Commission’s expense. I understand and agree to submit to the required physical examination and I do hereby agree and authorize the examining doctor to release any and all medical findings to the Road Commission, including results of any drug test given.

2. **False Statements or Omissions** – I hereby certify that the facts set forth in this application for employment are true and that the answers given to questions on this application are true. I understand that if I do not answer all questions on this application I may not be considered further for employment. I further understand that, if employed by the Tuscola County Road Commission, any false statement on this application or omission or unanswered question shall be considered sufficient cause for dismissal, no matter when discovered.

3. **Employment At Will** – I certify and understand that no individual contract of employment exists between myself and the Tuscola County Road Commission in any form whatsoever, either written or verbal. I further understand that, if employed, my employment exists at the will of myself and the Road Commission with or without cause. I further understand that this at-will relationship may not be changed or altered by any person.

Dated: _____

Signature of Applicant

Printed Name of Applicant

TUSCOLA COUNTY ROAD COMMISSION
RELEASE OF PRIOR EMPLOYMENT RECORDS
AND
WAIVER OF RIGHTS

I understand that, by law, the Tuscola County Road Commission must obtain a list of names and addresses of employers I have worked for in the past, together with the dates I was employed by each previous employer and the reason for leaving the previous employers. I hereby authorize the release of my personal and employment records to Tuscola County Road Commission and waive my right to written notice by my present and/or former employers whenever a disciplinary report, letter of reprimand, or other disciplinary action regarding me is divulged to Tuscola County Road Commission by present or former employers. In addition, I agree that I will not commence any legal action or seek any damages against any present or former employers who furnish Tuscola County Road Commission with any information or documents regarding my employment with said present or former employer.

Date: _____

Signature of Applicant

Printed Name of Applicant