

Kansas City Freightliner Sales, Inc.

APPLICATION FOR EMPLOYMENT
(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

DATE _____

PERSONAL INFORMATION

NAME _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

ARE YOU 18 YEARS OR OLDER? YES NO PHONE # () _____

IN CASE OF EMERGENCY, NOTIFY: _____

NAME _____ PHONE # () _____ RELATIONSHIP _____

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification form upon hire.

EMPLOYMENT DESIRED

POSITION _____ DATE YOU CAN START _____ DESIRED SALARY _____

ARE YOU EMPLOYED NOW? _____ IF SO, MAY ME INQUIRE OF YOUR EMPLOYER? _____

EVER APPLIED TO THIS COMPANY BEFORE? _____ WHERE? _____ WHEN? _____

EVER WORKED FOR THIS COMPANY BEFORE? _____ WHERE? _____ WHEN? _____

REASON FOR LEAVING _____

EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	*YEARS ATTENDED?	*GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE/BUSINESS				

GENERAL

SUBJECTS OF SPECIFIC STUDY OR RESEARCH _____

SPECIAL TRAINING _____

SPECIAL SKILLS _____

ARE YOU ABLE TO PERFORM THE SPECIFIC JOB FUNCTIONS OF THE POSITION WITH OR WITHOUT REASONABLE ACCOMMODATION? YES NO

It is Kansas City Freightliner Sales, Inc. policy to prohibit to discrimination and harassment against any applicant on the basis of race, color, religion, national origin, ancestry, marital status, veteran status, age, disability, pregnancy, genetic information, citizenship status, sex, sexual orientation, gender identity or any other basis prohibited by local, state or federal law. It is the policy of Kansas City Freightliner Sales, Inc. to recruit, hire, develop and promote associates based on individual ability, integrity, job performance and potential.

PREVIOUS EMPLOYERS: LIST BELOW THE LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST.			
PREVIOUS EMPLOYER'S NAME, ADDRESS & PHONE	SUPERVISOR'S PHONE	POSITION/JOB DESCRIPTION	DATE FROM/TO
Name: Address: City, State, Zip: Phone:			
Name: Address: City, State, Zip: Phone:			
Name: Address: City, State, Zip: Phone:			

REFERENCES: GIVE THE NAMES OF 3 PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.				
NAME	ADDRESS	PHONE NUMBER	RELATIONSHIP	YEARS ACQUAINTED
1.				
2.				
3.				

AUTHORIZATION

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause.

I understand and agree that I will settle any and all claims, disputes or controversies arising out of or relating to my application or candidacy for employment, employment and/or cessation of employment with affiliates and subsidiaries, exclusively be final and binding arbitration before a neutral arbitrator as set forth in Kansas City Freightliner Sales, Inc. mediation/arbitration policy, which I acknowledge reviewing or having an opportunity to review before signing the application. By way of example only, such claims include claims under federal, state and local statutory or common law, such as the Age Discrimination in Employment Act, Title VII of the Civil Rights Act of 1964, including the amendments of the Civil Rights Act of 1991, the Americans with Disabilities Act, the Law of Contract and the Law of Tort.

THIS APPLICATION FOR EMPLOYMENT CONTAINS A BINDING ARBITRATION PROVISION THAT MAY BE ENFORCED BY THE PARTIES.

DATE _____ SIGNATURE _____