EMPLOYMENT APPLICATION

Equal Opportunity Employer

BALLERS TRUCKING, LLP

INSTRUCTIONS: Please complete all sections thoroughly. Ballers Trucking, LLP requires full disclosure of employment history for the past three (3) years in compliance with company standards and commercial transportation regulations.

1. APPLICANT INFORMATION

FULL LEGAL NAME (LAST, FIRST, MIDDLE) _____

SOCIAL SECURITY NUMBER _____

DATE OF BIRTH _____

STREET ADDRESS _____

CITY, STATE, ZIP _____

PHONE NUMBER _____

EMAIL ADDRESS _____

POSITION APPLIED FOR _____

DESIRED STARTING SALARY _____

2. COMMERCIAL DRIVER / QUALIFICATION INFO (IF APPLICABLE)

DRIVER'S LICENSE NUMBER _____

STATE / LICENSE CLASS _____

EXPIRATION DATE _____

ENDORSEMENTS _____

3. EMPLOYMENT HISTORY (PAST 3 YEARS)

MOST RECENT EMPLOYER (EMPLOYER 1)

COMPANY NAME _____

PHONE NUMBER _____

DATES EMPLOYED (MO/YR TO MO/YR) _____

ADDRESS (CITY, STATE, ZIP) _____

SUPERVISOR NAME _____

POSITION HELD _____

REASON FOR LEAVING _____

MAY WE CONTACT FOR REFERENCE? ☐ Yes ☐ No

PREVIOUS EMPLOYER (EMPLOYER 2 - PAST 3 YEARS)

COMPANY NAME _____

PHONE NUMBER _____

DATES EMPLOYED (MO/YR TO MO/YR) _____

ADDRESS (CITY, STATE, ZIP) _____

SUPERVISOR NAME _____

POSITION HELD _____

REASON FOR LEAVING _____

MAY WE CONTACT FOR REFERENCE? ☐ Yes ☐ No

PREVIOUS EMPLOYER (EMPLOYER 3 - PAST 3 YEARS)

COMPANY NAME _____ PHONE NUMBER _____ DATES EMPLOYED (MO/YR TO MO/YR) _____

ADDRESS (CITY, STATE, ZIP) _____ SUPERVISOR NAME _____ POSITION HELD _____

REASON FOR LEAVING _____ MAY WE CONTACT FOR REFERENCE? ☐ Yes ☐ No

4. PROFESSIONAL REFERENCES

Please list three (3) professional references (former supervisors, business associates, or executive peers) not related to you.

REFERENCE 1: FULL NAME	COMPANY / TITLE	PHONE NUMBER	YEARS KNOWN

REFERENCE 2: FULL NAME	COMPANY / TITLE	PHONE NUMBER	YEARS KNOWN

REFERENCE 3: FULL NAME	COMPANY / TITLE	PHONE NUMBER	YEARS KNOWN

5. APPLICANT CERTIFICATION & AUTHORIZATION

I certify that all statements made in this employment application are true, complete, and correct to the best of my knowledge and belief. I understand that misrepresentation or omission of facts called for in this application is cause for rejection of this application or immediate dismissal if employed.

I authorize **Ballers Trucking, LLP** to contact my former employers, educational institutions, personal references, and any relevant driving or licensing authorities to verify the information provided herein.

APPLICANT SIGNATURE _____ DATE _____