



Employment Application

907 Crystal Avenue • Denton MD 21629
410-820-2320

A person with a disability or handicap requiring accommodation to complete this application and/or the interview process should notify Hollingsworth Trucking Human Resources as soon as possible. Hollingsworth Trucking is an Equal Opportunity Employer. It is the policy of Hollingsworth Trucking to afford equal employment opportunity regardless of race, color, religion, age, marital status, national origin, sex, disability, sexual orientation, genetic information, or veteran status.

Today's Date: _____

Name: _____
(Last / First / Middle)

Address: _____
(No. Street / City / State / Zip)

Telephone: (____) _____ - _____ Email Address: _____

Type of Work Desired _____ Wage/Salary Desired _____

How Were You Referred To Our Organization? _____

Are you 18 years of age or older? Yes No

If hired, can you provide written evidence that you are authorized to work in the U.S.? Yes No

Have you ever been convicted of a crime other than a minor traffic violation? (Convictions will not necessarily disqualify you from employment) Yes No

If yes, please explain: _____

Do You Have Any Relatives Who Are Employed By This Organization? Yes No

If yes, please explain: _____

Is there any information we would need about your name, or use of another name, for us to be able to check your work record? Yes No

If yes, please explain: _____

If applying for a position that requires driving, do you have an appropriate valid driver's license? Yes No

EDUCATION

	Name/Location	Course of Study	# Years Completed	Degree/Diploma
Elementary & Jr. High				
High School				
College				
Technical or Other				

EMPLOYMENT HISTORY

* All driver applicants to drive a commercial vehicle having a GVWR of 26,001 lbs. or more in intrastate or having to drive a commercial vehicle having a GVWR of 10,001 lbs. Or more in interstate commerce must provide the following information on employers during the proceeding **ten (10) years** for which you operated such a vehicle. This includes a commercial motor vehicle designed to transport fifteen (15) or more passengers, or any size vehicle used to transport materials in a quantity requiring placarding. Start with the most recent employer.

Company Name _____ Street Address _____
City & State _____ Phone Number _____
Dates of Employment _____ Position _____
Wage/Salary _____ Reason for Leaving _____

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

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

If Yes, please explain: _____

Which safe driving awards do you hold and from whom? _____

U.S. MILITARY SERVICE

Branch of Service _____ to _____

Rank and Type of Service _____

Training/Experience Received _____

Please list any additional information that relates to your ability to perform the job for which you have applied such as licenses, professional memberships, hobbies, etc. _____

DRIVER EXPERIENCE AND QUALIFICATION SECTION (Drivers Only)

Driver Licenses (include all states for which you held a license in the past 5 years)

<u>State</u>	<u>License Number</u>	<u>Type/Class</u>	<u>Expiration Date</u>

Accident Record for the past three (3) years (attach a separate sheet if needed)

<u>Accident Date</u>	<u>Nature of Accident</u>	<u>Injuries</u>	<u>Fatalities</u>

Traffic Convictions and forfeitures of bond or collateral for the past three (3) years

<u>Date</u>	<u>Location</u>	<u>Charge</u>	<u>Penalty</u>

Driving Experience

<u>Class of Equipment</u>	<u>Type of Equipment</u>	<u>Dates From/To</u>	<u>Approx. Number of Miles</u>
<u>Straight Truck</u>			
<u>Tractor of Semi Trailer</u>			
<u>Tractor-Two Trailers</u>			
<u>Other</u>			

Employment References: provide names of three persons who have supervised your work for more than one year

<u>Name</u>	<u>Company & Location</u>	<u>Years known</u>	<u>Business Relationship</u>	<u>Phone Number</u>	<u>Email Address</u>

APPLICANT'S STATEMENT

I certify that all of the information furnished on this Application and any accompanying resume is true, complete and accurate. I acknowledge and agree that any falsification, misrepresentation or omission of fact, either on this Application, my resume, or during the pre-hire process will be reason for (1) my not being offered employment or (2) dismissal at any time from the service of the Hollingsworth Trucking, if employed. I acknowledge and agree that nothing contained in this application or in the interview process is intended to create an employment contract between Hollingsworth Trucking and myself. I acknowledge and agree that any offer of employment that I may receive is contingent upon my successful completion of the Hollingsworth Trucking pre-employment screening process.

I acknowledge and agree that my employment and compensation is for no definite period and may, regardless of the time and manner of payment of my wages and salary, be terminated at any time by me or the Hollingsworth Trucking with or without cause, for any reason or no reason, and without previous notice. I also acknowledge and agree that the Hollingsworth Trucking has the right to unilaterally modify and/or terminate any policies, practices, procedures and standards it has adopted or implemented, to the extent not limited by law. I acknowledge and agree that no employee or representative of the Hollingsworth Trucking, other than its President or his/her designated representative, has either the power or authority to enter into any agreement for employment for any specified period of time, or to make any representation of agreements contrary to any of the foregoing, unless that agreement is in writing and signed by the President of the Hollingsworth Trucking. I acknowledge and agree that the foregoing expressly supersedes any prior representations, promises, contracts or statements made by or on behalf of the Hollingsworth Trucking.

I acknowledge and agree that I must notify the Hollingsworth Trucking within thirty (30) days of motor vehicle violations relating to motor vehicle traffic control (other than a parking violation) that may result in my conviction. I must also notify the Hollingsworth Trucking within the same business day if my driver's license has been suspended, revoked or canceled.

The Immigration Reform and Control Act of 1986 states that employers must require all persons hired to submit documents to the employer showing their identity and their right to be lawfully employed in the United States. It also requires the employee to complete and sign a form to this effect. I acknowledge and agree that if I am hired by Hollingsworth Trucking, I will be required to furnish documents for inspection to verify my identity and eligibility to legally work in the United States. I understand that these documents must be provided to the Hollingsworth Trucking within three (3) days of the commencement of my employment.

I acknowledge and agree that past employers, educational institutions and the military may be contacted to verify information contained in this application or for a reference and I authorize any such organization to provide the requested information. I further release and forever discharge Hollingsworth Trucking, its agents, its employees and the individuals, companies and health care providers contacted by Hollingsworth Trucking as part of its inquiries and investigations, from any and all claims, demands, damages, actions, causes of actions, suits of any kind or nature whatsoever arising from the Hollingsworth Trucking inquiries and investigation of my credentials and information in connection with my application.

I acknowledge and agree that screening tests for alcohol and illegal drugs may be required as part of the pre-employment screening process as well as during my employment with Hollingsworth Trucking. I also understand that medical certifications may also be required of applicants and during my employment with Hollingsworth Trucking.

I acknowledge and agree that it is Hollingsworth Trucking policy not to refuse to hire a qualified individual with a disability because of the person's need for a reasonable accommodation that would be required by the Americans with Disabilities Act.

UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT TO EXCEED \$100.

I understand that this entire statement applies to the period prior to or after I may be employed.

Your Signature: _____ Date: _____