



Register's Enterprises 9323 N Hwy 231 Panama City, FL 32404

General Application - Position applying for: Equipment Operator Mechanic Office

Legal Name First Middle Last

Mailing Address

City State Zip Code

Home or Cell Phone # **Email Address**

Gender: _____ DOB _____ SS # _____

Date You Can Start: _____ Salary Desired: _____

Education:

High School Name and Address City/State

Received:
Diploma _____ Other _____

College or Professional School Major Subject

Business, Trade, Technical, Vocational:

School Name and Address City/State

Major Subject Diploma or Certificate

Supplemental:

Please provide any relevant information such as professional license, certification(s) required by the position, equipment, or machines you can operate or any other related skills you wish us to know about.

Experience: Last 5 Years If you do not want us to call your current employer for verification of employment, please list DO NOT CALL by their name above.

Employer Phone #

Address City/State

Job Title Supervisor's Name

Employment Period: _____

Duties: _____

Reason for Leaving: _____

Experience:

Employer Phone #

Address City/State

Job Title Supervisor's Name

Employment Period: _____

Duties: _____

Reason for Leaving: _____

Experience:

Employer Phone #

Address City/State

Job Title Supervisor's Name

Employment Period: _____

Duties: _____

Reason for Leaving: _____

Personal References:

Name Phone # Years Known

Address

Name Phone # Years Known

Address

Business References:

Name Phone # Years Known

Address

Name Phone # Years Known

Address

Important Questions:

1. Are you 18 years of age or older: Yes No
2. Are you legally eligible for employment in the USA? Yes No
3. Do you possess a valid driver's license? Yes No
If yes, drivers license # _____ Class _____ State _____
4. Have you ever been convicted of a felony? Yes No
5. Are you able to pass a background check? Yes No
6. Are you a Veteran? Yes No If yes, what branch? _____

Please sign and date:

Signature: _____ Date: _____

Print Name: _____

PREVIOUS EMPLOYMENT VERIFICATION (Applicant sign & date only)

Sent to: _____

Fax Number: _____

Requested **Registers Enterprises**
9323 N. Hwy 231 Panama City, FL 32404

Phone: 850-722-7227
Fax: 850-722-7217

Name of Applicant: _____ Social Security #: _____

Job Title: _____ Hire Date: _____

Termination Date: _____ Resigned: Yes No Discharged: Yes No

If Discharged, why? _____

Eligible for Rehire? Yes _____ No _____ Upon Review _____ If No, please explain: _____

Equipment: Type of Tractor/Truck: _____ Trailer Length: _____

Refrigerated _____ Flatbeds _____ Vans _____ Tanker _____ Other _____

Overall Safety Performance: Poor _____ Fair _____ Good _____ Excellent _____

Accident information below requested in accordance with FMCSR Part 391.23. (Accidents within last 36 months.)

Accidents: # Preventable: _____ Description: _____

Non-Preventable: _____ Description: _____

Drug/Alcohol information below requested in accordance with DOT 49 CFR Part 40. (Tests done in last 36 months.)

Tested positive for controlled substance/alcohol? Yes _____ No _____

Ever refused a required test for drugs or alcohol? Yes _____ No _____

Person Providing Information

Title

1.) I hereby authorize the above-mentioned employer/school to release all information as to my character, work habits, performance, experience, fitness, together with reasons for termination concerning my employment to Registers Enterprises Trucking, Inc. (or their authorized agents) which may request such information in connection with my application for employment with Registers Enterprises Trucking, Inc.

2.) In conformity with 49 CFR part 40, I hereby authorize the above-mentioned employer/school and their agents to furnish Registers Enterprises Trucking, Inc. the above-requested information concerning D.O.T. drug and alcohol tests including pre-employment tests during the previous 3 years; the dates when I tested positive; the dates when I tested .04 or greater; the dates when I refused (including a verified adulterated or substituted result) to be tested for drugs and alcohol; and any other violations of 49 CFR part 40 and any information the above-mentioned employer/school and/or their authorized agents have received regarding violations of 49 CFR part 40 from my previous employers covered by D.O.T.

3.) I hereby release the above-mentioned employer/school and their authorized agents from any and all liability of any type as a result of providing the above-requested information to Registers Enterprises Trucking, Inc.

By signing below, I certify that I have read and fully understand Parts 1, 2, and 3 of this release and that I executed this release voluntarily, with the knowledge that any and all information released could affect my being employed with Registers Enterprises Trucking, Inc.

It is expressly acknowledged, understood and agreed that the information provided by the applicant regarding the applicant's employment during the previous three (3) years in accordance with Section 391.21(b)(10) of the Federal Motor Carrier Safety Regulations ("FMCSR") may be used, and the applicant's prior employers may be contacted, for the purpose of investigating the applicant's safety performance history information as required by paragraphs (d) and (e) of Section 391.23 of the FMCSR. The applicant has certain due process rights under the FMCSR regarding the information received as a result of these investigations, as described below.

Applicant's Due Process Rights: 1) The right to review information provided by previous employers; 2) The right to have errors in the information corrected by the previous employer and for that previous employer to re-send the corrected information to Registers Enterprises Trucking, Inc.; and 3) The right to have a rebuttal statement attached to the alleged erroneous information, if the previous employer and the driver cannot agree on the accuracy of the information.

Drivers who have previous Department of Transportation regulated employment history in the preceding three years, and wish to review previous employer-provided investigative information, must submit a written request to the Safety Compliance Manager of Registers Enterprises Trucking, Inc., which may be done at any time, including when applying, or as late as thirty (30) days after being employed or being notified of denial of employment. Registers Enterprises Trucking, Inc. will provide this information to the applicant within five (5) business days after receiving the written request. If, however, Registers Enterprises Trucking, Inc. has not yet received the requested information from the previous employer(s), then it will provide the information to the applicant within five (5) business days after it receives the requested safety performance history information. If the driver has not arranged to pick up or receive the requested records within thirty (30) days of Registers Enterprises Trucking, Inc. making them available, Registers Enterprises Trucking, Inc. will consider the driver to have waived the request to review the records.

Applicants Signature

Date

Just sign and date on the bottom of this page so we can verify your previous employment.