

Toby's Trucking, Inc

421 Payran Street Petaluma, CA 94952 707-763-3867 Fax 707-763-6846

APPLICATION FOR EMPLOYMENT

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job-related medical condition or handicap.

Date of Application		Position Applied			
For		Phone#			
Cell#					
Name			al Security		
#	Current				
Address					
Street		City		State	Zip
Address(es) past 3 years					How
Long?	Street	City	State	Zip	
					_ How Long?
	Street	City	State	Zip	
Are you a U.S. Citizen? drivers)//	Date of Birth (required for				
In Case of Emergency Notify Phone#					
Relationship			_ How were	you ref	erred?

Are you now employed?	_ If, not how long since leaving employment?
Rate of Pay Expected?	<u></u>

PHYSICAL HISTORY

Are you physically capable of heavy manual work? Yes /	No)
Would you be willing to take a physical examination? Yes	/	No
Is your DMV Medical Certificate current? Yes / No		

EMPLOYMENT HISTORY

All driver applicants in order to drive a commercial motor vehicle in Interstate Commerce must provide the following information on all employers for whom the applicant operated such vehicle during the preceding $\underline{\mathbf{10}}$ $\underline{\mathbf{vears}}$.

NOTE: Please start with the most recent employer

EMPLOYER Name			Position Held	
Address			From	
City	State	Zip	То	
Phone#		Contact P	erson	
Reason for Leaving				
EMPLOYER Name			Position Held	
Address			From	
City	State	Zip	То	
Phone#		Contact P	erson	
Reason for Leaving				
EMPLOYER Name			Position Held	
Address			From	
City	State	Zip	To	
Phone#		Contact P	erson	
Peacon for Leaving				

If you need to add more please attach separate sheet

ACCIDENT RECORD FOR PAST 3 YEARS OR MORE also PLEASE ATTACH DMV H6 PRINTOUT, 10-YEAR HISTORY, DATED WITHIN 30 DAYS OF EMPLOYMENT APPLICATION DATE

<u>DATE</u>		ACCIDENT TYPE	<u>FATALITIES</u>	<u>ES</u> <u>INJURIES</u>	
Last Accident					
Next Accident					
Next Accident					
TRAFFIC CONVICTION	S AND FORFEITU	IRES FOR THE PAST 3 YEA	<u>ARS</u>		
LOCATION	DATE	CHARGE		PENALTY/POINTS	
EDUCATION					
Highest Grade Completed		College			
Last School Attended			City		
EXPERIENCE AND QUA	LIFICATIONS (D	RIVER)			
STATE ISSUED	LICENSE #	TYPE		EXP. DATE	
		Class: A	ВС		
		Class: A	ВС		
When was your Class A first	issued				
Have you ever been denied	a license, permit or p	privilege to operate a motor veh	nicle, including be	eing suspended or revoked?	
Yes / No					
If yes please explain:					

DRIVING EXPERIENCE From/To____/___ No_ Super Dump Yes Transfer Yes No No Double Bottoms Yes End Dump From/To_____/___ No No___ From/To / Semi Bottom Yes Other commercial driving experience Yes No From/To / Please describe: Special Courses, Training, or Awards that will help you as a driver?

TO BE READ AND SIGNED BY APPLICANT

This certifies that I, myself, completed this application, and that all entries on it and information in it are true and complete to the best of my knowledge. I authorize Toby'sTrucking Inc. to make such investigations and inquire of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in providing responses to inquiries connected with my application. In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Company as permitted by law.