

Southwest Coaches, Inc. - Application for Employment

2660 State Hwy 23, Marshall, MN 56258
(507)532-4043 • e-mail: swcmar@starpoint.net

Position Desired <input type="checkbox"/> Managerial <input type="checkbox"/> Clerical <input type="checkbox"/> Mechanical <input type="checkbox"/> Driver	Date
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PERSONAL DATA

Last Name	First	Middle	Social Security #	DOB
Any other names you have use			Home Telephone	
Street Address:			Business Telephone	
City, State, Zip:			Pay Expecter	
Have you ever applied for employment with u: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Month and Year _____ Location _____				
Are you available for full-time work <input type="checkbox"/> Yes <input type="checkbox"/> No What hours can you work: _____			Will you work overtime if asked?:	
Are you legally eligible for employment in the United State			When will you be available fo begin work:	

EDUCATION

School	Name and Location of Scho	Course of Study	No. of years Completed	Did you Graduate?	Degree or Diploma
Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Military				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business, Trade or Technical				<input type="checkbox"/> Yes <input type="checkbox"/> No	
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Elementary				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Special training, skills, or honors of any type?

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Nearest relative (name, address, phone)

Emergency contact person (name, address, phone)

Driver's License Number

State of Issue	Class	Expiration Date
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Accident record for the past 3 years (attach additional sheet(s) if necessary)

Accidents	Date of Accident	Nature of Accident	Number of Injuries/Fatalities
Last			
Next Previous			
Next Previous			
Next Previous			

**Traffic convictions and forfeitures for the past 5 years
(exclude parking violations - attach additional sheet(s) if necessary)**

Location (City, State)	Date	Charge	Penalty

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

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

If the answer to either A or B is yes, attach a statement giving details.

The information provided in this Application for Employment is true, correct, and complete. If Employed, any misstatement or omission of fact on this application may result in my dismissal.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I understand that if I am hired, I will be an "at will" employee, i.e. I may quit at any time or be released at any time without cause.

If you decide to investigate my credit, criminal, or personal history, I authorize you to do so.

_____ Date

_____ Signature