

FEDERATED TRANSPORTATION SERVICES OF THE BLUEGRASS, INC

APPLICATION FOR EMPLOYMENT

Today's Date _____ Social Security No. _____

Position Desired _____

Date Available for Work _____ Time Available _____ to _____

Name _____
(Last) (First) (Middle) (Maiden)

Street Address _____ Apt. # _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

Languages Spoken _____ Salary Requirement \$ _____

Are you at least 18 years of age? Yes ☐ No ☐ How did you hear about us? _____

Have you ever been convicted of a felony, or within the last 5 years, or a misdemeanor that resulted in imprisonment? (A conviction will not necessarily disqualify an applicant).

Yes ☐ No ☐ If yes, what was the nature of your conviction? _____

EXPERIENCE

Beginning with your present or most recent job, list your last three employers, including military services. You may also include volunteer experience relevant to the position for which you are applying. These employers may be contacted for reference purposes.

Name of Company _____

Address _____

City _____ State _____ Zip Code _____

Telephone # _____ Dates of Employment from _____ to _____

Position Held _____ Salary \$ _____

Job Duties _____

Reason for Leaving _____

Eligible for rehire? Yes ☐ No ☐

If still employed, may we contact your present employer? Yes ☐ No ☐

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Reason for Leaving _____

Eligible for rehire? Yes ☐ No ☐

If still employed, may we contact your present employer? Yes ☐ No ☐

I do not authorize Federated Transportation Services of the Bluegrass, Inc. to contact:

Signed _____ Date _____

*** FOR DRIVING POSTIONS ONLY**

List all your driving experiences in vehicles larger than a personal automobile.

FEDERATED TRANSPORTATION OF THE BLUEGRASS, INC.
2308 FRANKFORT COURT
LEXINGTON, KY 40510
(859) 233-0066
(859) 233-1668 – FAX

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I authorize investigation and verification of all statements contained in this application for employment. It is understood that any misrepresentation or omission of facts, regardless of date of discovery, may be considered cause for termination or the withdrawal of an offer of employment.

I certify that the information given herein is true and correct to the best of my knowledge and belief.

Applicant's Signature _____ Date _____

EDUCATION AND TRAINING			
(Types: HS-High School CO-College PS-Post Graduate VO-Vocational/Technical GS-Grad School)			
TYPE	NAME OF INSTITUTION	DEGREE/ DATE	SPECIALTY OR MAJOR