

Today's Date:	

APPLICATION FOR EMPLOYMENT

GENERAL INFORM	IATION		
Last Name	First	Middle	Home Phone / Cell Phone
			()
Street Address			City, State, Zip
D 11 G 11			
Position Seeking		Have you ever been employed by	
			SMOOTH?
			Yes No Month/Year
Are you available for I	Full Time work?		Pay Desired
Yes No			
When are you available to begin working?		Are you available to work any shift?	
			Yes No
PLEASE NOTE:			
1) Prior to begin w	orking, all empl	oyees are	required to provide documentation of
eligibility to wo	rk in the United	States.	
2) In compliance with the Americans with Disabilities Act (ADA) SMOOTH, Inc.			
may consider reasonable accommodations that may be necessary for eligible			
applicants/employees to perform certain job functions. Please discuss any			
such needs with your interviewer.			
3) Conditional Hire	3) Conditional Hire employment eligibility background checks will be conducted.		packground checks will be conducted.

The information below is needed for a legally permissible reason related to the transportation industry. SMOOTH strictly complies the Civil Rights Act of 1964 and Title VI of that act which prohibit discrimination based on age, sex, citizenship, ancestry, marital status, disability, and sexual orientation. Information regarding SMOOTH's non-discrimination and Title VI Policy are available on request at the SMOOTH office or on-line at www.smoothinc.org

Driver License Number

License Class (A, B, or C)

Driver License Number	License Class (A, B, or C)
Driver License Endorsements (If Any)	Are you over 21 Years of age? Yes No
Where did you hear about a position at SMOOTH?	State the name(s) of relatives and friends working for SMOOTH.

PLEASE READ EACH SECTION BELOW AND INITIAL YOUR UNDERSTANDING

Initial, I understa nd this section	I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and, that the answers given by me are correct to the best of my knowledge. I understand that any omission or misstatement of material fact on this application, or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if employed, regardless of the time elapsed before discovery.	
Initial, I understa nd this section	I hereby authorized SMOOTH, Inc. to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment, and further authorize the references listed to disclose to SMOOTH any letters, reports, and other information related to my work records without giving me prior notice of such disclosure. I hereby release SMOOTH, Inc., my former employers, and all other entities from any and all claims, demands, or liabilities arising out of, or in any way related to such employment investigations or disclosures.	
Initial, I understa nd this section	I understand that nothing contained in this application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and SMOOTH, Inc. In addition, I understand that SMOOTH, Inc. is an At-Will Employer and as such, I agree that if employed by SMOOTH, Inc. my employment is for no definite or determinable period and may be terminated at any time, with or without notice, at the option of either myself or SMOOTH, Inc.	

	LOYMENT HISTORY		
***]	** List all present and past employment starting with your most recent employer		
(last f	ive years is sufficient). You must complete the	is section even if you submit a resume.	
	•	·	
***]	Per the Commercial Motor Vehicle Safety Act	of 1986, applicants for driving positions	
	furnish any commercial driving employment h		
mast	rainish any commercial arrying emproyment in	istory for the prior 121 (10) Tears.	
	Company Name	Telephone	
	Company Ivame		
	Address	Employed (Month & Year)	
		From To	
1.	Name of Superior		
	Job Title and Job Description	Reason for Leaving	
	N		
	May we contact this employer for a reference?	Comments	
	Yes No		
	Company Name	Telephone	
	Company Mane	()	
	Address	Employed (Month & Year)	
		From To	
2.	Name of Superior		
	Job Title and Job Description	Reason for Leaving	
	May we contact this employer for a reference?	Comments	
	Yes No	Comments	
	165110		
	Company Name	Telephone	
	The James and Th		
	Address	Employed (Month & Year)	
		From To	
3.	Name of Superior		
	Job Title and Job Description	Reason for Leaving	
	May we contact this employer for a reference?	Comments	
	Yes No	Comments	
	110	1	

	Company Name	Telephone
	Address	Employed (Month & Year) From To
4.	Name of Superior	
	Job Title and Job Description	Reason for Leaving
	May we contact this employer for a reference? Yes No	Comments
	Company Name	Telephone
	Address	Employed (Month & Year) From To
5.	Name of Superior	
	Job Title and Job Description	Reason for Leaving
	May we contact this employer for a reference? Yes No	Comments
	Company Name	Telephone ()
	Address	Employed (Month & Year) From To
6.	Name of Superior	
	Job Title and Job Description	Reason for Leaving
	May we contact this employer for a reference? Yes No	Comments
Applica	nt Signature Date	

AUTHORIZATION PREVIOUS EMPLOYMENT VERIFICATION AND REFERENCE CHECK

The undersigned, having applied for employment with SMOOTH, Inc., has identified your establishment as a prior employer and reference. The undersigned does hereby authorize you to provide the information requested below in accordance with provisions of all applicable Federal and State laws.

SMOOTH Applicant Name		Date
Applicant's Authorized Signature _		
Name Worked Under	Social Security Nur	mber
Position Held	Dates Worked Fron	n To
1 0	tent that you are able, would be great conse will be held in strict confidence.	ely appreciated. You have the assurance
Is the information above correct? If No, please explain?	[] Yes [] No	
- 1	voluntary [] or involuntary [
Would you re-hire this employee? If No, please explain	[] Yes [] No	
Supervisor's Signature THANK YOU!	Print Supervisor's Name & TITLE	Date
SMOOTH, Inc.		