



EMPLOYMENT APPLICATION

First Name		Middle Name		Last Name	
Street Address		City		State	Zip
Home Telephone	Mobile Telephone	Date of Birth	SSN	Sex	US Citizen
Height	Weight	Hair Color	Eye Color	Identifying Marks	
Have you ever worked for us before?		Where / When			
Any relatives currently employed with our company?			Name(s)		
Who referred you?					

Addresses for at least 5 years preceding date of this application

Street Address	City	State	Zip
Street Address	City	State	Zip
Street Address	City	State	Zip

This certifies that this application was completed by me and all entries on it and information in it are true and complete to the best of my knowledge.

This is my express permission to conduct a personnel investigation as to my qualifications, experience background, etc. It may conduct any person, law enforcement agency or firms it so desires, and such persons. Law enforcement agency or firms are requested to furnish whatever information they may have which would be relevant to the investigation. Any false statement hereon will be sufficient reason for rejection or termination.

Date _____ Signed _____

4 South Poplar Street Foxworth, MS 39483

Walker-Hill Environmental is an equal opportunity employer. This application meets the requirements of The Department of Transportation, The Department of Labor, The Civil Liberties Union and The Americans with Disabilities Act.

EDUCATION

School	Name or Location	Started (Year)	Ended (Year)	Courses	Graduated?
High School					
College					
Business					
Other					

List below any special courses of study or training:

Are you willing to be fingerprinted and/or photographed by this company? YES NO

Are you willing to submit to a lie detector test at any time? YES NO

Do you have a valid Operator's License? YES NO

Number _____ State _____ Expiration _____

Do you have a valid Commerical Driver's License? YES NO

Number _____ State _____ Expiration _____

Do you have a Haz-Mat Endorsement? YES NO

Have you ever had a License denied, suspended or revoked? YES NO

If yes, explain: _____

I authorize Walker-Hill Environmental, Inc. to obtain a Motor Vehicle Report. YES NO

ALL MOTOR VEHICLE ACCIDENTS INVOLVED IN DURING LAST 5 YEARS

Date	Nature	Fatalities or Personal Injury

Did any of these accidents involve driving while under the influence of Alcohol or Drugs? YES NO

ALL VIOLATIONS OF MOTOR VEHICLE LAW OR ORDINANCE (EXCEPT PARKING) FOR WHICH YOU WERE CONVICTED OR FORMED BOND OR COLLATERAL DURING THE LAST 5 YEARS.

Date	Nature	City and State

EMPLOYMENT HISTORY

Start	End	Employer Name and Complete Address and Telephone No.	Job Title and Supervisor	Salary	Reason for Leaving

DRIVING EXPERIENCE AND TYPE OF EQUIPMENT

Pick Up & Delivery (No. of Years)	Semi Trailers (No. of Years)	Full Trailers (No. of Years)	Buses (No. of Years)	Diesel or Gas Tractors (No. of Years)