

Quick's Commuter & Charter Service

Application For Employment

PLEASE READ BEFORE COMPLETING THIS APPLICATION

This company does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, sex, ancestry, non job-related handicap or disability, or on the basis of age against a person whose age is forty or over. No questions on this application is intended to secure information to be used for such discrimination.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed.

I authorize Quick's to inquire into all statements made in this form with full knowledge that any misrepresentation or omission of facts may prevent me being employed, and if I become employed, will be sufficient cause for dismissal.

In order to remain a viable and progressive company, all inherent and common law management functions and prerogatives are retained and vested exclusively in Quick's. If I should become employed, it is understood and agreed that rules, policies, and other communications regarding various aspects of employment which occur during the course of my tenure, whether verbal or in written form, do not constitute an employment contract of an implied covenant.

It is understood, that if I am hired as a Commuter and/or Charter Driver, I will be required to pay for all drug/alcohol testing and uniforms for the first six months of my employment. After the six month period has past and Quick's retains me as an employee, I will be reimbursed 100% of my expenses for drug testing and reimbursed the cost for two pair of pants and two shirts (FULL-TIME) and one shirt and one pair of pants (PART TIME).

First Name	MI	Last Name
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Phone #	Home ()) Work ())	SSN#	Date of Birth
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Address	City	State	Zip	How Long At This Address?
				Yrs Mos

Previous address if current address is less than three years (DOT 391-21)

Street Address	City	State	Zip

Position Desired	Full Time	Part Time	Date Available
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How Were You Referred To Us? _____

Please List Friends and Relatives Currently Employed By Us:

1. _____
2. _____
3. _____

Have You Been Employed Here Or At A Related Company Previously? _____ Yes _____ No

If "Yes" When? _____

Have You Ever Applied Here Before? _____ Yes _____ No

If "Yes" When? _____

If employment is offered, can you submit a birth certificate, Social Security card, certificate of U.S. Citizenship or verification of your legal right to work in the U.S.?

Yes _____ No _____

Have you ever been convicted of a criminal offense (felonies or misdemeanors)? Yes _____ No _____

If "Yes" explain (Individual circumstances will be considered) _____

ATTENDANCE RECORD

How many days were you absent from work or school during each of the past THREE years?

Year	Days	Year	Days	Year	Days
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U.S. MILITARY RECORD

Are you a veteran of the U.S. Military? Yes _____ No _____

U.S. Military Branch	Indicate dates of active/reserve duty
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EDUCATION

SCHOOL	Name/Location	Area of Study	Years	Degree Earned
High School	_____	_____	_____	_____
Technical	_____	_____	_____	_____
College	_____	_____	_____	_____
Graduate	_____	_____	_____	_____

List scholastic honors, offices held, and activities in high school/college _____

EMPLOYMENT RECORD

Starting with PRESENT or MOST RECENT list all previous employers over the last ten years. Include self-employment, summer, and part-time jobs. If you need more space, please continue in the comments area located near the end of this application.

Company Name _____	Phone Number _____	Full Time _____	Part Time _____
Address _____		Position _____	
_____		Supervisor _____	
Last Salary _____	Date of Employment (To _____ From _____)		
Duties Performed _____		Reason for Leaving _____	
_____		_____	

Company Name _____	Phone Number _____	Full Time _____	Part Time _____
Address _____		Position _____	
_____		Supervisor _____	
Last Salary _____	Date of Employment (To _____ From _____)		
Duties Performed _____		Reason for Leaving _____	
_____		_____	

EMPLOYMENT RECORD CONTINUED

Company Name _____	Phone Number _____	Full Time _____	Part Time _____
Address _____	Position _____		
_____	Supervisor _____		
Last Salary _____	Date of Employment (To _____ From _____)		
Duties Performed _____		Reason for Leaving _____	
_____		_____	

Company Name _____	Phone Number _____	Full Time _____	Part Time _____
Address _____	Position _____		
_____	Supervisor _____		
Last Salary _____	Date of Employment (To _____ From _____)		
Duties Performed _____		Reason for Leaving _____	
_____		_____	

PERSONAL REFERENCES

Give three personal referenced who are persons of good standing in their community, and who have known you for the past FIVE YEARS or more. DO NOT give relatives. You may include the names of friends or acquaintances presently employed by us.

Name	Address	Occupation	Years Acquainted

Name	Address	Occupation	Years Acquainted

Name	Address	Occupation	Years Acquainted

If you are applying for a drivers position, complete pages 4 and 5. If applying for any other position, stop here and sign and date below.

Signature _____

Date _____

NOTICE TO APPLICANTS

Screening test for illegal drug use is required as a condition of employment. In addition, random drug testing is mandatory throughout the year of all drivers.

APPLICATION INSERT FOR MOTOR COACH DRIVERS

First Name	MI	Last Name	SSN#	Date of Birth
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LIST ALL UNEXPIRED LICENSES AND PERMITS

State	License #	CDL#	Class	Endorsements	Exp Date

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.

DEFENSIVE DRIVING

List any defensive driving courses you have completed in the past FIVE years

Course Title	Date Completed	Length of Course (Hours)

DRIVING EXPERIENCE

	Type of Equipment	Dates (From/To)	Approx No. Of Miles (Total)
Bus			
Transit or Suburban Bus			
Truck or Combination			
Other			

List all states in which you have operated a vehicle (Other than POV) in the last ten years. _____

List any special courses or training that will help you as a driver. _____

ACCIDENT RECORD FOR THE PAST TEN YEARS

(Include all motor vehicle accidents)

Date	Nature of Accident (Head-On, Rear-End, Upset, etc)	Fatalities (Number)	Injuries (Number)

TRAFFIC CONVICTIONS

LIST TRAFFIC CONVICTION, FORFEITURE OF BOND OR COLLATERAL IN PAST THREE YEARS (OTHER THAN PARKING VIOLATIONS)

Location	Date	Charge	Penalty (Points)

AGREEMENT

It is agreed and understood that the employer or his agent will investigate the applicant's background to ascertain any and all information of concern to applicant's record, whether any or all formation is annotated on this application. I understand any or all of the information on this application will be used for the purpose of investigations of past employers and personal references. (Section 391.23 of the Motor Carrier Safety Regulations)

I agree to furnish any additional information upon request and complete any exams or completion of such forms that are required to complete his/her employment file.

I do hereby request and authorize Quick's Commuter and Charter Service, any person or persons, each former employer or any other company referred to in this application to give any information.

Signature _____

Date _____