## APPLICATION FOR EMPLOYMENT

I-70 Towing and Recovery

4201 Interstate 70 Dr SE Columbia, MO 65201 P: 573-449-3336

Please return application via email to: <a href="mailto:recruitment@i70towing.com">recruitment@i70towing.com</a>

Name:	Date of Birth:							
Phone number:	Email:	Email:						
Address:	City: State: Zip:							
	Addresses for the past three	ee years:						
Address:	City:	State:	Zip:					
Address:	City: State: Zip:							
Address:	City: State: Zip:							
	Experience and Qualific	<u>cations</u>						
<b>Drivers Licenses:</b>								
State	License #	Туре	Exp. Date					

## **Driving Experience:**

Class of equipment	Type: (Van, flatbed, wrecker, etc)	Dates: From To	Aprox. miles
Straight truck			
Tractor/Semi			
Other			

## Traffic convictions and forfeitures for past three years (other than parking)

Location	Date	Charge	Penalty
A. Have you ever be	en denied a license, pe	ermit or privilege to ope	rate a motor vehicle?
	Yes:	_ No:	
B. Has any li	cense, permit or privil	ege ever been suspende	d or revoked?
	Yes:	No:	
Employ	ment Record (Attach	sheet if more space is r	needed)
Emplo,	1110110 110001 4 (1100011		
DOT requires that employment for	`	or Commercial Driving F	Experience for the past 10 y
: DOT requires that employment for	r the last three years and	_	-
DOT requires that employment for the control of the	r the last three years and oyer: Name:		
DOT requires that employment for 1. Last employment Address:	r the last three years and		
DOT requires that employment for  1. Last employment for  Address:  Position held:	r the last three years and oyer: Name: From:	To:	Pay:
DOT requires that employment for  1. Last employment for  Address:  Position held:  Reason for leaving:	r the last three years and oyer: Name:From:	To:	Pay:
DOT requires that employment for  1. Last employment for Address:  Position held:  Reason for leaving:  2) Second last em	r the last three years and oyer: Name: From: ployer: Name:	To:	Pay:
DOT requires that employment for  1. Last employment for Address:  Position held:  Reason for leaving:  2) Second last em  Address:	r the last three years and oyer: Name: From: ployer: Name:	To:	Pay:
DOT requires that employment for  1. Last employed Address:  Position held:  Reason for leaving:  2) Second last employment for address:  Address:  Position held:	r the last three years and oyer: Name: From: ployer: Name: From:	To:	Pay:Pay:
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DOT requires that employment for  1. Last employed Address:  Position held:  Reason for leaving:  2) Second last employment for address:  Position held:  Reason for leaving:  3) Third last employment for address:	r the last three years and oyer: Name: From: ployer: Name: From: oyer: Name:	To:	Pay:Pay:

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

Date:		Applicant	signature:	
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