



# APPLICATION

## PERSONAL INFORMATION

Date: \_\_\_\_\_

NAME (LAST NAME FIRST)				SOCIAL SECURITY NUJMBER			
PRESENT ADDRESS			CITY		STATE	ZIP CODE	
PERMANENT ADDRESS			CITY		STATE	ZIP CODE	
PHONE NUMBER		EMAIL ADDRESS			REFERRED BY		
<b>POSITION DESIRED</b>							
Position Desired	DATE YOU CAN START	SALARY DESIRED	Class CDL	Hazmat?	Driving Record Past 3 Years # Accidents	Experience # Moving Viol.	Commercial Driving (Years)
Have You even been convicted of a Felony? If yes, give details and dates.					Any DUIs or DWIs in the past 7 years? YES NO How Many _____ (circle one)		
DATE OF BIRTH	VEHICLE MODEL	YEAR	MILEAGE	VEHICLE GVW	VIN Number		

## EDUCATION

NAME AND ADDRESS OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
HIGH SCHOOL			
COLLEGE OR TRADE SCHOOL			
OTHER EDUCATION			

## GENERAL INFORMATION

ARE YOU NOW EMPLOYED? YES <input type="checkbox"/> NO <input type="checkbox"/>	IF YES, MAY WE INQUIRE WITH YOUR PRESENT EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/>	SUPERVISOR'S NAME
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PREVIOUS RESIDENCES FOR LAST 7 YEARS: (USE ADDITIONAL PAPER IF NECESSARY)	FROM	TO

PREVIOUS EMPLOYERS	FROM	TO

REFERENCES (NAME, ADDRESS, TELEPHONE #, OCCUPATION)	YRS KNOWN

## AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge. I further understand that any falsified statements on this application shall be grounds for dismissal or termination of any contract offered.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company of all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of AXion has any authority to enter into any agreement for employment or contract services for any specific period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by someone authorized at AXion.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the American with Disabilities Act (ADA) and other relevant federal and state laws."

Date: _____	Signature: _____
Interviewed by: _____	Date: _____
Remarks: _____	

# VOLUNTARY AUTHORIZATION TO RELEASE INFORMATION

Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Social Security # \_\_\_\_\_ Citizenship \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Birthplace: \_\_\_\_\_

I hereby consent and give authority to Axion Logistics Ltd., and their agents, to examine records and obtain information regarding my background. I specially authorized the following background checks.

## Report Type

## You MUST Initial Below

Employment Background Verification

\_\_\_\_\_

Residential Background Verification

\_\_\_\_\_

Criminal Records Investigation

\_\_\_\_\_

**Driver Motor Vehicle Record Check** I agree that information obtained on my MVR check may be shared with AXion's Insurance agency and their underwriters.

\_\_\_\_\_

AS REQUIRED BY SECTION 391.23 FEDERAL MOTOR CARRIER SAFETY REGULATIONS (FOR PAST THREE YEARS)

I hereby authorize the above background investigation(s) for the purpose of qualifying for employment OR to become a contractor for Axion Logistics, Ltd. I hereby release Axion and its agents from any and all liability, which may result from furnishing such information. I understand my signature on this authorization is voluntary; however, failure to complete this form may mean that required information cannot be obtained to complete the background investigation. Without this investigation authority, you will not be offer either employment or contractor status with AXion Logistics Ltd.

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ DOB: \_\_\_\_\_

(ATTACH A CLEAR COPY OF DRIVERS LICENSE)

\_\_\_\_\_  
(APPLICANTS SIGNATURE)

\_\_\_\_\_  
(DATE)

The above named person has made application with AXion Logistics, Ltd. for the position of \_\_\_\_\_ . Please furnish the information for the person listed above for the appropriate period listed above.