

# APPLICATION FOR EMPLOYMENT

## Overdrive Logistics, Inc.



DO NOT substitute Resume for completed Employment Application! Please include Resume

### PERSONAL:

*An Equal Opportunity Employer*

Last Name	First	Middle	Date
Street Address		Apt. #	Home Phone
City, State, Zip		E-Mail	Cell Phone
Have you ever applied for employment at Overdrive Logistics before? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes: Month and Year    Location			Business Phone
Have you ever applied for employment at Overdrive Logistics, under another name? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes: Month and Year    Location			Salary Required
When will you be available for work?			Will you work overtime/weekends, if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
How did you learn of our organization? (internet, employee referral, etc...)			
Source:		Employee Referral:	
Are you legally eligible for employment in the United States? See disclaimer (a)			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>POSITION DESIRED:</b> <input type="checkbox"/> Accounting <input type="checkbox"/> Dispatch <input type="checkbox"/> OTR Driver <input type="checkbox"/> Ops Support <input type="checkbox"/> Sales <input type="checkbox"/> Other			
Have you been fired, discharged, or asked to resign from any job within the past 7 years?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any friends or relatives working for Overdrive Logistics?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Name:		Position:	Relationship:
Do you have any friends or relatives working for a competitor?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Name:		Position:	Relationship:

### EDUCATION:

	Name & Location of School	Course of Study	No. of Yrs. Completed	Did you graduate?	Degree or Diploma
<input type="checkbox"/> High School					
<input type="checkbox"/> Business/Trade Technical					
<input type="checkbox"/> College					
<input type="checkbox"/> Graduate					

<b>Computer Skills:</b> Do you have extensive computer experience? <input type="checkbox"/> Yes <input type="checkbox"/> No
Programs used:
Please specify other relative training or skills (language, machines, operations, etc., )
Typing Speed (WPM):

**EMPLOYMENT HISTORY:** *Please give accurate employment records for the past 10 years. Start with your present or most recent employer.*

Company Name	Telephone
Address	From / / TO / /
Name of Supervisor	Beginning Salary per Ending Salary per
State Job Title and Description	
Reason for Leaving	Eligible for rehire: <input type="checkbox"/> Yes <input type="checkbox"/> No If no,
Company Name	Telephone
Address	From / / TO / /
Name of Supervisor	Beginning Salary per Ending Salary per
State Job Title and Description	
Reason for Leaving	Eligible for rehire: <input type="checkbox"/> Yes <input type="checkbox"/> No If no,
Company Name	Telephone
Address	From / / TO / /
Name of Supervisor	Beginning Salary per Ending Salary per
State Job Title and Description	
Reason for Leaving	Eligible for rehire: <input type="checkbox"/> Yes <input type="checkbox"/> No If no,
Company Name	Telephone
Address	From / / TO / /
Name of Supervisor	Beginning Salary per Ending Salary per
State Job Title and Description	
Reason for Leaving	Eligible for rehire: <input type="checkbox"/> Yes <input type="checkbox"/> No If no,

## JOB REQUIREMENTS:

\*DO NOT answer questions #1 and #2 prior to reading and understanding the Job Description of the job for which you are applying.

\*1. Are you able with <sup>(1)</sup> Reasonable *Accommodation*, if necessary, to perform all of the essential functions/duties of the job for which you are applying?

Note: Applicants will not necessarily be disqualified if unable to perform a particular job duty or duties.

Yes  No

\*2. If you answered "NO" to question #1, please describe which duties you are unable to perform. \_\_\_\_\_

3. Is there any reason you cannot be at work every scheduled day and work a full day?  Yes  No

4. I understand that in the course of employment processing, a criminal background check may be conducted.  Yes  No

5. Have you ever been convicted of a felony? See disclaimer (b)  Yes  No

6. If you are under 18 years of age, do you have a work permit?  Yes  No

7. I understand that as a condition of employment, I will be required to submit voluntarily to a urinalysis test by Overdrive Logistics, and that a confirmed positive test will result in termination or denial of employment.  Yes  No

8. I agree to any pre-employment assessments that may be administered in order to assess job related knowledge/ skills during the interview process.  Yes  No

9. Are you prohibited or limited in your performance of any job duties for our company by any covenants, a non-compete, confidentiality agreement or other contractual obligations with another company and/or competitor? See disclaimer (c)  Yes  No

***(<sup>1</sup>) Overdrive Logistics acknowledges the "Americans with Disabilities Act of 1990" and will provide Reasonable Accommodation to all disabled persons.(<sup>2</sup>)Overdrive Logistics acknowledges "Title VII of the Civil Rights Act of 1964" and is an EEOC employer.***

DISCLAIMERS:

- (a) Pursuant to the Immigration Reform and Control Act of 1986, all applicants who are offered employment must produce documents establishing their identity and authorization for employment in the United States. These documents must be produced no later than seventy-two (72) hours after employment commences. In addition, all new hires will be required to verify their employment authorization under oath by signing DHS Form I-9. Overdrive Logistics is an E-Verify employer.
- (b) Hawaii, Massachusetts & Philadelphia Applicants do not answer the question below at this time. Please note that you do NOT have to identify a record of any adult or juvenile arrest, detention or conviction that has been sealed, expunged, annulled, erased, pardoned or statutorily eradicated, set aside or otherwise dismissed by court order. Please note that answering "Yes" to this question will not automatically bar you from employment. Only those crimes which are substantially related to the position you are seeking will be considered.
- (c) Any agreement or contract applicant is currently obligated to must be provided with application.

Please list **3 personal references** we may contact (excluding relatives)

	Name	Address	Phone	Years Known
1				
2				
3				

**Periods of Unemployment:** Please account for all periods of unemployment greater than one month in the past 10 years.

From	To	Reason for Unemployment

# CERTIFICATION:

I certify that all statements on this application are true and hereby grant Overdrive, permission to verify such answers. I hereby authorize all my previous employers and references to furnish any information concerning my employment record, or personal character. I hereby release all such persons from liability or damages incurred as a result of inquiry and furnishing this information. I understand and agree that falsification of facts on this application is grounds for termination of employment and rejection of this application. I also understand that, subsequent to being employed, Georgia is an at will state and I may be dismissed with or without cause within the right of law. I authorize Overdrive Logistics, to provide my employment record in whole or in part and in confidence to any prospective employer, government agency or other party with legal and proper interest.

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

Soc. Sec. # \_\_\_\_\_

Signature: \_\_\_\_\_

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

## Office Use Only:

To: \_\_\_\_\_

Mr./Ms. \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

Has applied for employment with Overdrive Logistics, and states that he/she was employed by you:

From \_\_\_\_\_ To \_\_\_\_\_ in the position of \_\_\_\_\_.

The above certification authorizes and releases you from liability in providing us this valuable information.

Position Held: \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Starting Pay \_\_\_\_\_ Ending Pay \_\_\_\_\_

Please rate: (Circle one)

<b>Attendance:</b>	Poor	Average	Excellent	<b>Safety Habits:</b>	Poor	Average	Excellent
<b>Dependability:</b>	Poor	Average	Excellent	<b>Job Performance:</b>	Poor	Average	Excellent
<b>Honesty:</b>	Poor	Average	Excellent	<b>Attitude:</b>	Poor	Average	Excellent

Other comments on performance: \_\_\_\_\_

Reason for leaving your employment: \_\_\_\_\_

Eligible for rehire:  Yes  No  Against Company Policy

If no, why? \_\_\_\_\_

\_\_\_\_\_  
Name of person supplying information

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date