



# MINUTEMAN TRUCKS

## Minuteman Trucks, Inc. Employment Application

| Applicant Information                             |  |  |                              |                             |  |                         |  |                              |                             |         |  |
|---|--|--|------------------------------|-----------------------------|--|-------------------------|--|------------------------------|-----------------------------|---------|--|
| Full Name:  |  |  |                              |                             |  | Date:                   |  |                              |                             |         |  |
| <i>Last</i>                                       |  |  | <i>First</i>                 |                             |  | <i>M.I.</i>             |  |                              |                             |         |  |
| Address:  |  |  |                              |                             |  |                         |  |                              |                             |         |  |
| <i>Street Address</i>                             |  |  |                              |                             |  | <i>Apartment/Unit #</i> |  |                              |                             |         |  |
|   |  |  |                              |                             |  |                         |  |                              |                             |         |  |
| <i>City</i>                                       |  |  |                              |                             |  | <i>State</i>            |  | <i>ZIP Code</i>              |                             |         |  |
| Phone:  |  |  |                              |                             | E-mail Address:                                |                         |  |                              |                             |         |  |
| Date Available:                                   |  |  |                              | Social Security No.:        |  |                         |  | Desired Salary:              |                             |         |  |
| Position Applied for:                             |  |  |                              |                             |  |                         |  |                              |                             |         |  |
| Are you a citizen of the United States?           |  |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO | If no, are you authorized to work in the U.S.? |                         |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |         |  |
| Have you ever worked for this company?            |  |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO | If yes, when?                                  |                         |  |                              |                             |         |  |
| Education   |  |  |                              |                             |  |                         |  |                              |                             |         |  |
| High School:                                      |  |  |                              |                             |  | Address:                |  |                              |                             |         |  |
| From:   |  |  | To:                          |                             |  | Did you graduate?       |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO | Degree: |  |
| College:  |  |  |                              |                             |  | Address:                |  |                              |                             |         |  |
| From:   |  |  | To:                          |                             |  | Did you graduate?       |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO | Degree: |  |
| Other:  |  |  |                              |                             |  | Address:                |  |                              |                             |         |  |
| From:   |  |  | To:                          |                             |  | Did you graduate?       |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO | Degree: |  |
| References  |  |  |                              |                             |  |                         |  |                              |                             |         |  |
| <i>Please list three professional references.</i> |  |  |                              |                             |  |                         |  |                              |                             |         |  |
| Full Name:  |  |  |                              |                             |  | Relationship:           |  |                              |                             |         |  |
| Company:  |  |  |                              |                             |  | Phone:                  |  |                              |                             |         |  |
| Address:  |  |  |                              |                             |  |                         |  |                              |                             |         |  |
| Full Name:  |  |  |                              |                             |  | Relationship:           |  |                              |                             |         |  |
| Company:  |  |  |                              |                             |  | Phone:                  |  |                              |                             |         |  |
| Address:  |  |  |                              |                             |  |                         |  |                              |                             |         |  |
| Full Name:  |  |  |                              |                             |  | Relationship:           |  |                              |                             |         |  |
| Company:  |  |  |                              |                             |  | Phone:                  |  |                              |                             |         |  |
| Address:  |  |  |                              |                             |  |                         |  |                              |                             |         |  |

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**Previous Employment**

|  |  |     |                  |                              |                             |                |
|--|--|-----|------------------|------------------------------|-----------------------------|----------------|
| Company:   |  |     |                  | Phone:                       |                             |                |
| Address:   |  |     |                  | Supervisor:                  |                             |                |
| Job Title:   |  |     | Starting Salary: |                              |                             | Ending Salary: |
| Responsibilities:  |  |     |                  |                              |                             |                |
| From:  |  | To: |                  | Reason for Leaving:          |                             |                |
| May we contact your previous supervisor for a reference? |  |     |                  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |                |

|  |  |     |                  |                              |                             |                |
|--|--|-----|------------------|------------------------------|-----------------------------|----------------|
| Company:   |  |     |                  | Phone:                       |                             |                |
| Address:   |  |     |                  | Supervisor:                  |                             |                |
| Job Title:   |  |     | Starting Salary: |                              |                             | Ending Salary: |
| Responsibilities:  |  |     |                  |                              |                             |                |
| From:  |  | To: |                  | Reason for Leaving:          |                             |                |
| May we contact your previous supervisor for a reference? |  |     |                  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |                |

|  |  |     |                  |                              |                             |                |
|--|--|-----|------------------|------------------------------|-----------------------------|----------------|
| Company:   |  |     |                  | Phone:                       |                             |                |
| Address:   |  |     |                  | Supervisor:                  |                             |                |
| Job Title:   |  |     | Starting Salary: |                              |                             | Ending Salary: |
| Responsibilities:  |  |     |                  |                              |                             |                |
| From:  |  | To: |                  | Reason for Leaving:          |                             |                |
| May we contact your previous supervisor for a reference? |  |     |                  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |                |

**Military Service**

|                                   |  |  |                    |  |     |  |
|-----------------------------------|--|--|--------------------|--|-----|--|
| Branch:                           |  |  | From:              |  | To: |  |
| Rank at Discharge:                |  |  | Type of Discharge: |  |     |  |
| If other than honorable, explain: |  |  |                    |  |     |  |

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.  
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

|            |  |  |  |       |  |
|------------|--|--|--|-------|--|
| Signature: |  |  |  | Date: |  |
|------------|--|--|--|-------|--|