



Employment Application

Date _____

Please complete all four pages with signatures where indicated!

Name _____
Last Name Middle initial First name

Address: _____

City _____ State _____ Zip code _____

Daytime Phone # _____ - _____ - _____ Evening Phone # _____ - _____ - _____

Cell Phone # _____ - _____ - _____ Email address: _____

DRIVERS LICENSE # _____ - _____ - _____

SOCIAL SECURITY # _____ - _____ - _____ **Date of Birth:** ____/____/____

Place of birth: _____

Position applying for: ____ Tow Truck Driver ____ Dispatcher ____ Bookkeeping

Date you can start ____/____/____ **Desired Wage/Salary \$** _____

Current employer: _____

Address _____ **City** _____ **St** _____ **zip** _____

Phone # _____ - _____ - _____ **Extension** _____

Contact person for employment verification is: _____

PHYSICAL RECORD: DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED ____no ____yes

If so, please give details:

PRIOR EMPLOYERS (list below your last four employers starting with most current ones first)

Dates-Month/Year	Name & Address	Salary	Position	Reason for leaving
From ____/____/____ To: ____/____/____ Phone # for verification: _____	_____	_____	_____	_____
From ____/____/____ To: ____/____/____ Phone # for verification: _____	_____	_____	_____	_____
From ____/____/____ To: ____/____/____ Phone # for verification: _____	_____	_____	_____	_____
From ____/____/____ To: ____/____/____ Phone # for verification: _____	_____	_____	_____	_____

PERSONAL REFERENCES (Give name, address and phone number of three persons NOT related to you that you have known for at least two years)

<u>Name</u>	<u>Address</u>	<u>Phone #</u>	<u># years</u>	<u>Relationship</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

IN CASE OF EMERGENCY PLEASE NOTIFY:

Name: _____ Relationship: _____

Address _____ Phone # _____ - _____ - _____

I am a citizen of the United States of America ___yes___ ___no___

I have a valid/current USA work permit # _____ Issued in _____ Expires _____

(I can supply a copy if I am hired)

"I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information that they may have personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same information to you.

I understand and agree that, if hired, my employment is for no definite period of time and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice."

Date _____ Signature _____

C & D TOWING, INC. TRAINING WAGES POLICY

Any trainee or probationary employee will *not* be paid for their “training period”. This is commonly known as “training on their own time”. At the conclusion of the training period (usually two week’s minimum), the trainee in question will either be deemed as hired or as unable to employ. ***Those not hired will not be paid for their training time.***

Those individuals hired at the end of the training period will have a probationary period of six months. If the probationary employee successfully completes the probationary period he/she will then be given a “training wages bonus”. This bonus shall be the equivalent of 50 % of what their training pay might have been. This bonus will be payable at the end of the first full payroll term after the end of the probationary period.

I have read and fully understand and recognize the company policy regarding training pay.

Signature

Dated this _____ day of _____, 200__.

C & D Towing, Inc.

AUTHORIZATION OF EMPLOYEE OR PROSPECTIVE EMPLOYEE

I hereby state that:

- A. *I am an employee or prospective employee of the company designated – C & D Towing, Inc.*
- B. *I authorize said company, or its agent (s) to obtain my Motor Vehicle Report from the Illinois State Department of Licensing, to be used exclusively by said company to determine whether I should be employed to operate a commercial vehicle upon the public highways of the State of Illinois.*
- C. *I understand that “Commercial Vehicle” means any vehicle the principal use of which is the transportation of commodities, merchandise, produce, freight, animals, or passengers for hire.*
- D. *I further understand that no information contained in the Motor Vehicle Report shall be divulged, sold, assigned, or otherwise transferred to any third person or party.*

Employee or Prospective Employee (**Please print**)

Drivers License Number

Address

State license was issued

Signature

Date of Birth

C & D TOWING, INC.
5150 N Cicero Avenue
Chicago, Illinois 60630