

Platinum Courier Service, Inc

Application for Employment

Name _____ Date _____
Last First Middle

Current Address _____ Phone No _____

Are you legally eligible for employment in the USA? _____

Position(s) applied for _____ Would you work full time? _____ Part time? _____

What is your expected pay rate? _____

Availability: Full Time _____ Part Time _____ Morning _____ Afternoon _____ Evening/Night _____

If your application is accepted, on what date will you be available? _____

What are your skills, abilities and or qualifications that would especially suit you to work for this company?

Record of Education

School	Name	City, State	Last Year Completed	Diploma/ Degree
High School :	_____	_____	_____	_____
College:	_____	_____	_____	_____
Other Schooling:	_____	_____	_____	_____

Employment History:

List past five years of employment, beginning with your most recent or current employer.

Name, Address Phone # of Business	From /To Mo/Yr	Ending Wage	Reason for Leaving	Supervisor
--------------------------------------	-------------------	-------------	--------------------	------------

1. _____

Name, Address Phone # of Business	From /To Mo/Yr	Ending Wage	Reason for Leaving	Supervisor
--------------------------------------	-------------------	-------------	--------------------	------------

2. _____

3. _____

Are you currently employed? _____ May we contact the employers listed above? _____ If not, indicate the one(s) you do not wish us to contact.

Personal References

Name	Address	Phone Number	Relation to You
------	---------	--------------	-----------------

1. _____

2. _____

3. _____

Driver and Vehicle Information

Current state, number and expiration date of driver's license(s) issued to you: _____

Make, model and year of your vehicle: _____

Name of automobile insurance company and policy number: _____

What is the extent of your insurance coverage? Please be specific with regard to limits with regard to bodily injury, property damage and the related deductibility amounts:

List any and all motor vehicle accidents and or traffic violations (excluding parking tickets.) that have occurred within the last 3 years. _____

Have you ever had any license, permit or privilege to operate a motor vehicle, which has been issued to you, denied, revoked or suspended? If yes, specify the facts and circumstances surrounding such denial, revocation or suspension:

Have you been convicted of a felony or misdemeanor offense other than traffic violations? _____

If yes, name the felony or misdemeanor and describe the circumstances. A conviction will not necessarily bar you from employment.

I hereby certify that the information in this application is true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history through any agency of your choice. I understand that have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigative report that is made. I understand and agree if hired, that either the company or I may terminate my employment for any or no reason.

Signature of Applicant: _____

Please fax completed application to: 763-428-0274