



For manager completion

LOCATION/CONTRACT: _____

9785 Goethe Road, Sacramento, CA 95827

APPLICATION FOR EMPLOYMENT

All job offers are contingent upon passing a pre-employment physical examination, functional capacity exam, drug screen, background and Consumer Report (if applicable).

DATE _____ SOCIAL SECURITY NO. _____ - _____ - _____
 Application expires in 30 days

NAME _____ E-MAIL ADDRESS _____
 (FIRST) (MIDDLE) (LAST)

PRESENT ADDRESS _____ TELEPHONE _____
 (STREET) HOW LONG? _____

(CITY) (STATE) (ZIP) HOW LONG? _____
 Address for Past 5 Years (STREET) (CITY) (STATE) (ZIP) HOW LONG? _____

(STREET) (CITY) (STATE) (ZIP) HOW LONG? _____

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Please give name, telephone number and relationship of the person to contact in case of emergency:

 (NAME) (TELEPHONE) (RELATIONSHIP)

Please give name, address, and telephone number of your closest relative not living with you:

 (NAME) (ADDRESS) (TELEPHONE) (RELATIONSHIP)

Position Applying For _____ Temporary ____ Part-Time ____ Full Time ____

Who referred you? _____

Have you ever worked for any division of Matheson Trucking, Inc.? _____ If yes, Where _____

Dates/From _____ To _____ Reason for Leaving: _____

Name(s) of Relative(s) employed at Matheson: _____ (Relationship)

Have your ever been convicted of a misdemeanor or felony? _____ If yes, please provide the following:

CONVICTION DATE _____ CONVICTION TYPE _____ STATE/COUNTY OF CONVICTION _____

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EDUCATION

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College: 1 2 3 4

NAME/ADDRESS OF LAST SCHOOL ATTENDED: _____

DRIVER EXPERIENCE & QUALIFICATION

Answer the question in this section only if applying for a driver position.

Date of Birth _____ The U.S. Department of Transportation requires that driver applicants state their date of birth (391.21 (b) (2)).
Must be 21 years of age or more

EMPLOYMENT RECORD

The U.S. Department of Transportation requires that driver applications show all employment for the past ten years. Non – Drivers must show most recent 5 years of employment. Include school, training programs, military service, self-employment, and employment.

List most recent work first and explain all gaps in employment. Please explain all periods of unemployment over 30 days. You may attach a separate sheet of paper if necessary

EMPLOYER				DATES	
Name			From: Month	Year	To: Month Year
Address			Position Held:		
City	State	Zip	Salary/ Wage	No. of states Driven in:	
Contact Person	Phone No.		Reason for Leaving:		

Unemployment: (if any) From Mo. _____ Yr. _____ To: Mo. _____ Yr. _____ Explain: _____

EMPLOYER				DATES	
Name			From: Month	Year	To: Month Year
Address			Position Held:		
City	State	Zip	Salary/ Wage	No. of states Driven in:	
Contact Person	Phone No.		Reason for Leaving:		

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EMPLOYER				DATES					
Name				From: Month Year		To: Month Year			
Address				Position Held:					
City		State		Zip		Salary/ Wage		No. of states Driven in:	
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Unemployment: (if any) From Mo. _____ Yr. _____ To: Mo. _____ Yr. _____ Explain: _____

EMPLOYER				DATES					
Name				From: Month Year		To: Month Year			
Address				Position Held:					
City		State		Zip		Salary/ Wage		No. of states Driven in:	
Contact Person			Phone No.		Reason for Leaving:				

Unemployment: (if any) From Mo. _____ Yr. _____ To: Mo. _____ Yr. _____ Explain: _____

EXPERIENCE AND QUALIFICATIONS – OTHER

List any trucking, transportation or other experience that may help in your work for Matheson: _____

List courses and training other than those shown elsewhere in this application: _____

List special equipment (Forklift, etc.) or technical skills that may help in your work for Matheson (other than those already listed):

TO BE READ AND SIGNED BY APPLICANT

I authorize you to make sure investigations and inquiries to my employment history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers and other persons from all liability in responding to inquiries and releasing information in connection with my application.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Company.

“I understand that information I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted, for the purpose of investigating my safety performance history as required by 49 CFR 391.23(d) and (e). I understand that I have the right to:

- **Review information provided by current/previous employers;**
- **Have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and**
- **Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information.”**

This certifies that I completed this application, and that all entries on it and information in it are true and complete to the best of my knowledge.

DATE

APPLICANT'S SIGNATURE