



Sundowner Trailers, Inc.
Application for Employment (Please Print)

SUNDOWNER TRAILERS, INC., PROVIDES EQUAL EMPLOYMENT OPPORTUNITIES TO ALL APPLICANTS AND EMPLOYEES WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, OR DISABILITY, IN ACCORDANCE WITH APPLICABLE FEDERAL AND STATE LAWS. ACCOMMODATION IS AVAILABLE TO APPLICANTS WITH A DISABLING CONDITION, WHEN APPLYING, TESTING, OR INTERVIEWING FOR A POSITION. PLEASE CONTACT THE PERSONNEL DEPARTMENT TO REQUEST ACCOMMODATION.

Date of application ____/____/____ Position(s) Applied For _____

Name _____
Last First Middle

Address _____ Social Security # ____ - ____ - ____
Street City State Zip Code

Primary Telephone # (____) _____ Secondary Telephone # (____) _____

How were you referred to us? _____

What is your desired salary range? \$ _____

Type of employment desired: Full-time Part-time Temporary

Date you will be available to start work ____/____/____

What times are best to call you at home? from ____: ____ AM PM to ____: ____ AM PM

Are you currently employed?..... YES NO

If yes, may we contact your present employer? YES NO

May we contact you at work? YES NO

If yes, work number (____) _____ - _____ Best time to call: from ____: ____ AM PM to ____: ____ AM PM

Have you ever filed an application with us before? YES NO

If yes, give date..... ____/____/____

Have you ever been previously employed by our organization?..... YES NO

If yes give dates from ____/____/____ to ____/____/____

Do you have any objection to working overtime if necessary YES NO

If yes, please explain _____

Can you travel if required by this position? YES NO

If hired, can you furnish proof that you are 18 years of age, or if under 18, do you have a permit to work? YES NO

Do any of your relatives, other than spouse, work here? YES NO

If yes, state name, relationship and location _____

Can you submit proof of legal employment authorization and identity?..... YES NO

Are you currently on "lay-off" status and subject to recall?..... YES NO

Have you ever been convicted of or been subject to a deferred adjudication, including a plea of no contest to a felony charge?..... YES NO

If your answer is "Yes" please explain in concise detail below or on a separate sheet of paper, giving the dates and nature of the offense, the name and location of the court, and the disposition of the case(s). A conviction may not disqualify you, but a false statement will.

Are there any felony charges pending against you now? YES NO

If your answer is "Yes" please explain in concise detail below or on a separate sheet of paper, giving the dates and nature of the offense, the name and location of the court, and the disposition of the case(s). A conviction may not disqualify you, but a false statement will.

Please provide all employment information for your past four employers starting with the most recent, including any job related military service assignments and volunteer activities. Organizations which indicate race, color, religion, gender, age, national origin, disabilities or other protected status, should be excluded.

EMPLOYER	DATE EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS			
TELEPHONE NUMBER	STARTING SALARY		
	\$	PER	
STARTING/FINAL JOB TITLE	ENDING SALARY		
	\$	PER	
REASON FOR LEAVING			

EMPLOYER	DATE EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS			
TELEPHONE NUMBER	STARTING SALARY		
	\$	PER	
STARTING/FINAL JOB TITLE	ENDING SALARY		
	\$	PER	
REASON FOR LEAVING			

EMPLOYER	DATE EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS			
TELEPHONE NUMBER	STARTING SALARY		
	\$	PER	
STARTING/FINAL JOB TITLE	ENDING SALARY		
	\$	PER	
REASON FOR LEAVING			

EMPLOYER	DATE EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS			
TELEPHONE NUMBER	STARTING SALARY		
	\$	PER	
STARTING/FINAL JOB TITLE	ENDING SALARY		
	\$	PER	
REASON FOR LEAVING			

EXPLAIN ANY GAPS IN EMPLOYMENT LISTED ON PREVIOUS PAGE.

Other Skills and Qualifications (Do not include information which would indicate race, color, religion, gender, age, national origin, disabilities or other protected status)

SUMMARIZE ANY JOB-RELATED TRAINING, LICENCES, CERTIFICATES, AND/OR OTHER QUALIFICATIONS

LIST ANY ADDITIONAL INFORMATION YOU WOULD LIKE CONSIDERED

Education	Name of School	Course of Study/Degree	Number of Years Completed	Did You Graduate?
High School				
Junior College				
College				
Graduate/ Professional				
Vocational/Other				

Personal/Professional References (Do not include family members or past supervisors)

Name	Phone Number	Best Time To Call	Occupation

APPLICANT'S CERTIFICATION AND AGREEMENT – PLEASE READ CAREFULLY
BEFORE SIGNING

I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete, and further understand and agree that such statements may be investigated and any misstatement, falsification, or omission of information shall be grounds for refusal to hire, or, if hired, for immediate dismissal.

I authorize the references listed in this Application for Employment, and any prior employer, educational institutions, or any other persons or organizations to give Sundowner Trailers, Inc. any and all information concerning my previous employment/educational accomplishments, disciplinary information or any other pertinent information they may have, personal or otherwise, and release all parties from all liabilities for any damage that may result from furnishing same to you. I hereby waive written notice that employment information is being provided by any person or organization.

I understand as a condition of employment, I will be required to provide legal proof of authorization to work in the United States.

In accordance with ADA requirements, if I require an accommodation to perform my job, I must notify Sundowner Trailers, Inc. as soon as I know or reasonably should have known that an accommodation was needed. Failure to do so may bar me from alleging that Sundowner Trailers, Inc. has not accommodated me as required by law.

I hereby authorize Sundowner Trailers, Inc. to secure criminal conviction history from the appropriate law enforcement agency, should they determine it is necessary to do so.

I understand that if hired by Sundowner Trailers, Inc., my employment would be an at-will relationship, which means it could be terminated, with or without notice at any time, by me or by my employer, for any reason or for no reason at all. I also certify that during this application process, no one at Sundowner Trailers, Inc., made promises to me that would create a contract between Sundowner Trailers, Inc., and me, or made promises that would in any way alter the at-will relationship.

I understand that if hired, I must authorize Sundowner Trailers with its designated agent(s) to perform a physical exam and withdraw a specimen(s) of my blood, urine, hair, or saliva for chemical analysis to determine or exclude the presence of drugs or other substances. I understand that decisions concerning my employment will be made as a result of these tests.

This application for employment shall be considered active for a period of time not to exceed 30 days. Any applicant wishing to be considered for employment beyond this time period should re-submit an application to the Personnel Department.

An unsigned application will not be considered.

Applicant's Signature: _____ Date _____