

WINGARD TOWING SERVICE

Employment Application

Wingard Towing Service is an equal opportunity employer and, as required by law, does not discriminate in employment on the basis of race, sex, religion, or age. This application will be given every consideration, but its receipt does not imply employment, nor an offer of employment.

****Each question on this application must be answered accurately, completely and legibly in order to be considered****

**** A resume may be attached but does not substitute as completing this application. ****

FOR WHICH POSITION YOU ARE APPLYING?

TOW TRUCK DRIVER DISPATCHER ADMINISTRATIVE

Personal Information

Full Legal Name: _____ DL #: _____ DOB: _____

Address: _____

Main Ph #: _____ Alternate Ph #: _____ Email: _____

Date available to begin work: _____ Full Time / Part Time? _____

Are you able to work nights and/or weekends? Yes / No *Explain if needed: _____

Highest level of education: _____ School attended: _____

List any skills, licenses, & certificates that you possess which are related to the job you seek: _____

Have you ever been convicted of a criminal offense? Yes / No If yes, please list date(s): _____

List charge(s): _____

Where convicted: _____

Have you ever been terminated / forced to resign from any job? Yes / No If yes, please explain: _____

Previous Employment

Please list previous work experience from most recent to least recent.

Current/Last employer: _____ Date range of employment: _____ - _____

Address: _____ Job Title: _____

List responsibilities: _____

Supervisor's name: _____ Average # of hours worked / week: _____

Starting salary/hourly wage: _____ Ending salary/hourly wage: _____

Reason for leaving: _____

May we contact this employer? Yes / No If no, why not? _____

Previous employer: _____ Date range of employment: _____ - _____
Address: _____ Job Title: _____
List responsibilities: _____
Supervisor's name: _____ Average # of hours worked / week: _____
Starting salary/hourly wage: _____ Ending salary/hourly wage: _____
Reason for leaving: _____
May we contact this employer? Yes / No If no, why not? _____

Previous employer: _____ Date range of employment: _____ - _____
Address: _____ Job Title: _____
List responsibilities: _____
Supervisor's name: _____ Average # of hours worked / week: _____
Starting salary/hourly wage: _____ Ending salary/hourly wage: _____
Reason for leaving: _____
May we contact this employer? Yes / No If no, why not? _____

References

Please list 2 references, other than family members, that are familiar with your work. Please ensure that the persons listed below have given you permission to disclose information about yourself and can attest to your work ethic.

1) Name: _____ Relationship: _____ Phone #: _____
Company: _____ Address: _____

2) Name: _____ Relationship: _____ Phone #: _____
Company: _____ Address: _____

Supplemental Information

Please describe your expectations of this job: _____

List personal & professional traits you feel a good tow truck driver should have: _____

Describe how you would handle an upset customer, police officer and/or dispatch personnel: _____

Which towing equipment types are you most familiar with: wrecker (hook truck), rollback (flatbed), and/or self-loading wrecker truck? _____

Please explain your long-term career goals: _____

Are you willing to take a drug test at your own expense if given a conditional offer of employment? Yes / No

Are you willing to take random drug tests during employment with Wingard Towing Service? Yes / No

Do you have a current medical certificate? Yes / No

Are you willing to get a medical certificate at your own expense if given a conditional offer of employment? Yes / No

Disclaimer and Signature

By signing below, applicant indicates agreement with each statement listed below.

- ✓ *I certify that this application was completed by me, and that the answers given by me in the previous questions and statements are true and correct.*
- ✓ *I understand that any misleading or incorrect statements may render this application void and, if employed, would be cause for my termination.*
- ✓ *I further agree that Wingard Towing Service shall not be liable, in any respect, if my employment is terminated because of false statements, answers or omissions made by me in this application.*
- ✓ *I also authorize the companies, schools, or persons named in this application for employment to give any information regarding my employment, character and qualifications and hereby release said companies, schools, or persons from all liability for any damage for issuing this information.*
- ✓ *I authorize the company to make such investigations and inquiries of my personal, employment, driving record, criminal and/or medical history and any other related matters that may be necessary in arriving to an employment decision.*
- ✓ *I understand and agree that if I am offered employment, my employment is for no definite period of time and may be terminated without prior notice by myself or the employer.*

Applicant's signature: _____ Date: _____