

MACS Courier Service, LLC
1701 Ridgeway West
Montgomery, AL 36110
(334)396-1496
(334)260-9313 fax

Waiver to Check References

I hereby authorize MACS Courier Service, LLC to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to MACS Courier Service, LLC any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release MACS Courier Service, LLC, my former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

Applicant (Please Print)

Signature of Applicant

Date

MACS Courier Service, LLC
1701 Ridgeway West
Montgomery, AL

Application for Employment

In compliance with Federal and state Equal Employment Opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status or non-job related disability.

Name _____ Tel No. _____
(First) (Middle) (Maiden, if any) (Last)

Current Address _____ How Long? _____
(Street) (City) (State & Zip Code)

ADDRESS FOR THE PAST THREE YEARS

_____ How Long? _____
(Street) (City) (State & Zip Code)

_____ How Long? _____
(Street) (City) (State & Zip Code)

DRIVING EXPERIENCE AND QUALIFICATIONS

Driver Licenses

State	License #	Type	Expiration Date

Driving Experience

Class of Equipment	Type of Equipment (Van, Tank, Flat, Etc.)	From	To	Approx. No. of Miles (Total)
Straight Truck				
Tractor and Semi-Trailer				
Other				

Accident Record for Past 3 Years or More (Attach Sheet If More Space Is Needed)

Dates	Nature of Accident (head-on, rear-end, etc.)	Fatalities	Injuries

Traffic Convictions and Forfeitures for the Past 3 Years (Other than Parking Violations)

Location	Date	Charge	Penalty

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes _____ No _____

B. Has any license, permit or privilege ever been suspended or revoked? Yes _____ No _____

IF THE ANSWER TO EITHER A OR B IS YES, ATTACH STATEMENT GIVING DETAILS

EDUCATION/TRAINING

High School: No. of Years Completed (circle one) 1 2 3 4

Diploma: ___ Yes ___ No **G.E.D.:** ___ Yes ___ No

College and/or Vocational School: No. of Years Completed (circle one) 1 2 3 4

School(s) _____

City/State _____ Degree/Certification Earned _____

Other Training or Certification:

School: _____

City/State: _____ Degree/Certification Earned _____

EMPLOYMENT RECORD

Please make sure you list all places of employment for the past 10 years. Give exact dates, addresses, telephone numbers, etc. Start with the present. **ACCOUNT FOR ALL PERIODS.** Include employment, schooling, special training, military service, unemployment and part-time employment.

Employer _____ Phone No. _____

Employed From _____ To _____ Pay Rate _____ Per _____

Address _____

Job Title _____ Reason for leaving _____

Employer _____ Phone No. _____

Employed From _____ To _____ Pay Rate _____ Per _____

Address _____

Job Title _____ Reason for leaving _____

Employer _____ Phone No. _____

Employed From _____ To _____ Pay Rate _____ Per _____

Address _____

Job Title _____ Reason for leaving _____

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Address _____

Job Title _____ Reason for leaving _____

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Employed From _____ To _____ Pay Rate _____ Per _____

Address _____

Job Title _____ Reason for leaving _____

PERSONAL REFERENCES

Please list the names of at least two personal references. Do not refer to anyone in our employ, previous employees, mere acquaintances or relatives.

Name	Years Known	Occupation	Address	Phone

Is there any reason you might be unable to perform the functions of the job for which you have applied? (If you have a question regarding the essential job functions please ask the interviewer before answering this.) _____

AFTER COMPLETING THIS APPLICATION, PLEASE REVIEW THE ANSWERS TO EVERY QUESTION AND THE INFORMATION YOU SUPPLIED. ANY ERRORS, OMISSIONS, INACCURACIES OR INEXACTNESS MAY RESULT IN REJECTION OF YOUR APPLICATION OR DISCHARGE, IF FOUND OR DISCOVERED AFTER YOU ARE EMPLOYED. IF YOU HAVE ANY QUESTIONS AND/OR COMMENTS, PLEASE DISCUSS THEM WITH OUR REPRESENTATIVE BEFORE YOU CERTIFY TO THE TRUTHFULNESS, ACCURACY AND COMPLETENESS OF THE ANSWERS OR INFORMATION YOU HAVE SUPPLIED.

I, the undersigned, do certify that I have answered the above questions and provided the requested information, truthfully, accurately and completely. I further give MACS Courier Service, LLC, or its agents or officers my express permission to make inquiry with any person, firm, corporation or institution in reference to the information I may have supplied.

I also expressly request that all previous employers or other persons, firms, corporations or institutions release any information regarding my past record to any officer or agent of MACS Courier Service, LLC.

I have also understood that if MACS Courier Service, LLC, discovers that any of the answers or information that I have supplied is not correct, complete and accurate or that I have omitted information requested that I may be discharged from their employment, if employed, or that my application for employment may be rejected.

This application for employment shall be considered active for a period of time **not to exceed 45 days**. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means that the employee may resign at any time and the employer may discharge employee at any time with or without cause. It is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

Date: _____

Applicant's Signature: _____

Examiner's Signature: _____

DISCLOSURE AND RELEASE

In connection with my application for employment (including contract for services) with you, I understand that consumer reports which may contain public record information may be requested from DAC services, Tulsa, Oklahoma. These reports may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, accidents, etc. I further understand that such reports may contain public record information concerning my driving record, worker's compensation claims, credit, bankruptcy proceedings, criminal reports, etc., from federal, state and other agencies which maintain such records; as well as information from DAC concerning previous driving record requests made by others from such state agencies, and state provided driving records.

I AUTHORIZE, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY DAC TO FURNISH THE ABOVE-MENTIONED INFORMATION:

I have the right to make a request to DAC, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the sources of information, and the recipients of any reports on me which DAC has previously furnished within the two year period preceding my request. I hereby consent to your obtaining the above information from DAC, and I agree that such information, which DAC has or obtains, and my employment history with you, if I am hired, will be supplied by DAC to other companies which subscribe to DAC Services.

I hereby authorize procurement of consumer report(s). If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for you to procure consumer reports at any time during my employment (or contract) period.

Print Name

Social Security Number

Date of Birth

Applicant's Signature

Date

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