



Waller Truck Co., Inc.
400 S McCleary Road
Excelsior Springs, MO 64024
Phone: 800-821-2196
Fax: 816-629-3470

**NON-DRIVER
EMPLOYMENT APPLICATION**

If you are applying for a DRIVING position please fill out the Driver Application.

Note: Read and complete all portions of this application in ink. Please print. This application will not be considered if incomplete. Be advised that your prior employers will be contacted for the purpose of investigation of your background as required by D.O.T. Regulation Part 391.23.

Date of Application: _____ Position applying for: _____

Referred By: _____

PERSONAL INFORMATION

Date of Birth: _____

Social Security Number: _____

Name: _____ Home Phone: _____
Last First Middle

Present Address: _____ How Long: _____
Street City State/Zip

Address for _____ How Long: _____
Past 3 Years Street City State/Zip

_____ How Long: _____
Street City State/Zip

In Case of Emergency Notify: _____
Name Address Phone Number

Have you ever applied to this company? When? _____ Have you ever worked for this company? When? _____

Names of Relatives in our employment: _____

Have you ever been convicted of a felony? Yes No

If answered "YES" please state circumstances and dates _____

EDUCATION

Circle highest grade completed 1 2 3 4 5 6 7 8 9 High School 1 2 3 4 College 1 2 3 4

School: _____ Date completed _____

Please list any Degrees, Certifications or Awards:

MILITARY RECORD

Have you ever served in the U.S. Armed Forces _____ Branch _____ Dates: From _____ To _____

Rank at discharge _____ Reserve Status _____

EMPLOYMENT RECORD FOR THE PAST 10 YEARS

Complete the following regarding your employment including anytime you were self-employed or unemployed. Start with your present or most recent employer. Please give accurate and complete information listing all full-time and part-time work. If you need additional space, continue on a separate sheet of paper. Please attach resume. (Resume does not take the place of this page)

Current or Last Employer

From _____ To _____

Phone # (____) _____

Position Held _____

Job Description: _____

May we call? Yes No Who? _____

Company Name: _____

Address: _____

Full or Part-time _____ Managed Others Yes No

Salary or \$/Hr.: _____

Reason for Leaving: _____

Second Last Employer

From _____ To _____

Phone # (____) _____

Position Held _____

Job Description: _____

May we call? Yes No Who? _____

Company Name: _____

Address: _____

Full or Part-time _____ Managed Others Yes No

Salary or \$/Hr.: _____

Reason for Leaving: _____

Third Last Employer

From _____ To _____

Phone # (____) _____

Position Held _____

Job Description: _____

May we call? Yes No Who? _____

Company Name: _____

Address: _____

Full or Part-time _____ Managed Others Yes No

Salary or \$/Hr.: _____

Reason for Leaving: _____

Fourth Last Employer

From _____ To _____

Phone # (____) _____

Position Held _____

Job Description: _____

May we call? Yes No Who? _____

Company Name: _____

Address: _____

Full or Part-time _____ Managed Others Yes No

Salary: _____

Reason for Leaving: _____

Fifth Last Employer

From _____ To _____

Phone # (____) _____

Position Held _____

Job Description: _____

May we call? Yes No Who? _____

Company Name: _____

Address: _____

Full or Part-time _____ Managed Others Yes No

Salary or \$/Hr.: _____

Reason for Leaving: _____



WALLER TRUCK CO., INC. RELEASE STATEMENT
PLEASE READ AND SIGN CAREFULLY BEFORE SUBMITTING

BY COMPLETING AND SUBMITTING THIS APPLICATION I:

- Understand that Waller Truck Co., Inc. is under no obligation to hire me and that any employment I am offered is “at will” and not for any specified period of time and can be terminated at anytime, with or without cause.
- Hereby authorize, without liability, any person or organization whose name I have given as a reference, or by whom I have been previously employed to furnish Waller Truck Co., Inc. any information they may have concerning my character, ability, financial responsibility, job performance, habits, reasons for leaving employment and all information concerning my employment, and I authorize release of that information to companies and carriers requesting such information. I hereby release all persons and organizations from any claims for damage of any kind which may occur to me by reasons for furnishing such information.
- Acknowledge that I will be required to agree to submit to a physical examination and drug testing as part of the employer process, authorize release of my results to Waller Truck Co., Inc., and agree that any offer will be contingent on the results.
- Authorize any law enforcement agency or court of record to furnish Waller Truck Co., Inc. information concerning my Motor Vehicle Record, or any felony or misdemeanor of which I have been convicted.
- Acknowledge and agree that I will familiarize myself with and abide by all present and subsequently issued rules, policies, or procedures of Waller Truck Co., Inc.
- Certify by my signature that this application was completed by me and that all entries and information in it are true and complete to the best of my knowledge. Any false, misleading or incomplete statements of the information shall be grounds for denial of employment or for immediate termination regardless of when such information is discovered.

Signature: _____

Date: _____