



UTILITY TRAILER OF DALLAS, INC.

34241 LBJ Freeway
Dallas, Texas 75241
Phone 972-225-8845
Fax 972-225-1928

Employment Application – Please fill in EVERY box.

Applicant Information

Full Name: _____ Date: _____

_____ Last First M.I.

Address: _____

_____ Street Address Apartment/Unit #

_____ City State ZIP Code

Phone: () _____ E-mail Address: _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Previous Employment

Company: _____ Phone: () _____

Address: _____ Supervisor: _____



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Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

YES NO

May we contact your previous supervisor for a reference?

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

YES NO

May we contact your previous supervisor for a reference?

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

YES NO

May we contact your previous supervisor for a reference?

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer, Authorization, Agreement, and Signature

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of this company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative."

Signature: _____ Date: _____

I, the below signed, make this application as an inducement to this Employer to employ applicant. I have read this complete application, including Equal Opportunity Statement and I certify that entries made by me are without omission and are a full, truthful account of my present and past stations. I authorize and give the right to this Employer to make a thorough, vigorous investigation of all entries made on this form by me and other materials I have provided. By my signature I release any and all parties from any and all liability for any and all statements, writings, conversations or communications of any form, with this Employer regarding any entry on this form and other material I have provided. Any false or misleading statement or entry on this form and other material I have provided is cause sufficient for my immediate termination, if I am employed.

My signature certifies that I have read this application in detail and am in complete agreement with its contents.

Signature: _____ Date: _____