

# LBT Transport, Inc.

615 1<sup>st</sup> Ave NE  
PO Box 10  
Buffalo Center, IA 50424

641.562.2048  
800.458.2048  
641.562.2137 (fax)

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## Application of 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, veteran status, non-job related disability, or any other protected group status.

**Applying For:** Full Time \_\_\_\_\_ Part Time \_\_\_\_\_      **Position:** \_\_\_\_\_

**Today's Date** \_\_\_\_\_      **DATE AVAILABLE FOR WORK** \_\_\_\_\_

### General Information

*Please print thoroughly in ink. Incomplete applications will not be processed.*

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Current Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

How long at this address? \_\_\_\_\_ Past address if less than five years at present address:

Past Address: \_\_\_\_\_ How long at this address? \_\_\_\_\_

### Education History

Please circle the highest grade completed:

Grade School: 1 2 3 4 5 6 7 8 9 10 11 12

College: 1 2 3 4

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

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: \_\_\_\_\_

**Employment History:**

A complete record of employment for the past ten years is necessary for your application to be processed. Please list your present employer first. **All periods of time must be accounted for during this ten-year period**, including military service, self-employment, non-driving positions and periods of unemployment. Provide **complete address** and **phone numbers**, including area codes and zip codes.

*(Use a separate sheet of paper if needed)*

From: \_\_\_\_\_ To: \_\_\_\_\_ Company Name: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Street Address: \_\_\_\_\_  
Position: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_ Phone #: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Company Name: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Street Address: \_\_\_\_\_  
Position: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_ Phone #: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Company Name: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Street Address: \_\_\_\_\_  
Position: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_ Phone #: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Company Name: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Street Address: \_\_\_\_\_  
Position: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Personal References (Do not use relatives or former employers):**

1. \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_  
Name Occupation Phone Number
  
2. \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_  
Name Occupation Phone Number
  
3. \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_  
Name Occupation Phone Number

**L.B. Transport, Inc., is an equal opportunity employer.**

*It is agreed and understood that any misrepresentation given on this document shall be considered an act of dishonesty.*

*It is agreed and understood that the motor carrier or his agents may investigate my background to ascertain any and all information of concern to commercial driving record, whether same is of record or not, and I release the employers and persons named herein from all liability for any damages on account of their furnishing such information.*

*It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include investigating Consumer Report, including information regarding my character, general reputation, personal characteristics and mode of living.*

*This certifies that the above information was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.*

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_