



## APPLICATION FOR EMPLOYMENT

Applicants are considered without regard to race, color, sex, religion, age, national origin, or disability.

### PERSONAL INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Are you 18 years or older?  Yes  No

Emergency Contact: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of VISA or Immigration Status?  Yes  No

Do you have a valid driver's license?  Yes  No

### EMPLOYMENT DESIRED

Position: \_\_\_\_\_ Date you can start: \_\_\_\_\_

Ever worked for this company before?  Yes  No If Yes, When? \_\_\_\_\_

Reason for Leaving? \_\_\_\_\_

### EDUCATION

Highest School Level: \_\_\_\_\_ Years Attended: \_\_\_\_\_ Did you graduate?  Yes  No

Special Training: \_\_\_\_\_

Certificates / License: \_\_\_\_\_

Special Skills: \_\_\_\_\_

### FORMER EMPLOYERS

Last Employer: \_\_\_\_\_ Dates of Employment \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Description of Work: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer?  Yes  No

Please Initial \_\_\_\_\_

**Second Last Employer:** \_\_\_\_\_ Dates of Employment \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Description of Work: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**Third Last Employer:** \_\_\_\_\_ Dates of Employment \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Description of Work: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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**REFERENCES** (Give below the names of three persons not related to you, whom you have known at least one year)

	Name	Phone	Company	Years Known
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

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PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize Jackson Trailer & Equipment and/or Jackson Truck & Trailer to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. I agree to submit to a screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that employees of Jackson Trailer & Equipment and/or Jackson Truck & Trailer serve at-will, and the employment relationship may be terminated at any time by either party, for any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a state security questionnaire and state loyalty oath, and to comply with company and departmental regulations.

Applicant Signature: \_\_\_\_\_ Date \_\_\_\_\_

Email this application to: [Info@jtandt.com](mailto:Info@jtandt.com)

Or Hand Deliver to 583 Hwy 80 E. Pearl MS 39208