

PTS OF AMERICA, LLC

PO Box 121591
Nashville, TN 37212

Employment Application



APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.		
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

ACCIDENT HISTORY (PAST 5 YEARS)

TRAFFIC CONVICTIONS (PAST 5 YEARS)

SUPPLEMENTAL DRIVER APPLICATION
Driver License #: _____ State: _____
Expiration Date: _____ Type: _____ Restrictions: _____
Have you ever been denied a license before?
Has any license, permit or privilege ever been suspended or revoked?
Have you ever been convicted of a Military or Civilian DUI?
If yes to any above, Please explain:

DRIVER EXPERIENCE
Type/Class of equipment (Van, Tank, etc.): _____

EDUCATION				
High School	Address			
From _____ To _____	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College	Address			
From _____ To _____	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other	Address			
From _____ To _____	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

APPLICANT TESTING CONSENT FORM
<p>I understand that as part of the pre-employment process, Prisoner Transportation Services, LLC , will conduct an in-depth background investigation in an effort to determine my suitability to fill the position for which I have applied. In keeping with the efforts of Prisoner Transportation Services, LLC to identify the most qualified individuals, I do hereby voluntarily consent to the sampling and subsequent testing of my hair and bodily fluids, including blood and urine. I understand that refusal to supply the necessary samples may be grounds for rejection of my application for employment. I further understand that the results of the testing may be utilized in conjunction with any other information developed during the pre employment process to determine my eligibility for the position for which I have applied and that laboratory reports may be subject to disclosure and I hereby consent to same.</p>

Signature	Date
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DISCLAIMER AND SIGNATURE
<p>I certify that my answers are true and complete to the best of my knowledge. I also understand that falsified information or significant omissions may disqualify me from further consideration for employment and, if employed, may result in termination of employment if discovered later. I understand that any employment with PTS of America, LLC is for an indefinite term and can be terminated with or without cause at any time at the discretion of either the company or myself. I understand that hours worked will be set and may be changed by the company at any time. I understand that upon being hired, I will have to provide proof of authorization to work in the United States.</p>

Signature	Date
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