SHERWOOD FREIGHTLINER, STERLING & WESTERN STAR, INC. (SFSWS)

APPLICATION FOR EMPLOYMENT

Please print or type all information

GENERAL						
Name						
Last	First	t MI		Social Security	 y Number	
Present #Years	Street	City	County	State Zip		
Phone		Email				
Previous Address		Previous Residence	су			
	Street on or National of the U.S., ed to work in the U.S. for	an alien lawfully working for		State Zip nce, or [] Yes	#Years [] No	
		ncement of employment, yo tion to work in the United S		uments		
Are you under th (If your answer is	e age of 18? s yes, you must supply w	orking papers if hired.)		[] Yes	[] No	
		POSITION				
Type of employm	nent desired: [] F	ull-time [] Part-ti	me [] Tempora	ary [] Sum	nmer	
Position applied	for:	Date available	Salary req	uirement \$		
Have you ever ap	oplied or interviewed for	a position with SFSWS?	[] Yes*	[] No		
*If yes, dat	te	Position				
Have you ever be	een employed by SFSWS	?				
If yes, dat	e	Position				
Reason fo	or leaving					
Referred by:	[] Newspaper [] Agency [] Emplo	oyee [] Othe	er		
Name of employe	ee who referred you					
-	o anyone currently at SF	SWS? [] Yes* [] No)			
Have you ever be	en convicted of or place	BACKGROUN led guilty or "no contest" (r		any felony?		
-	een convicted of or plead	ieu guilly of Tio contest" (f	ioio contenderej to a	any lelony?		
	-	stion, please explain (use a	dditional paper if ned	cessary).		
Note: Disclosure	e of convictions does not	t automatically disqualify ye	ou from employment	consideration.		

If the position requires driving, do you have a valid driver's license?						[] Yes	[] No
During the last seven (7) years, has your driver's license been suspended or revoked?						[] Yes*	[] No
*If you answered "Yes"	to the above question	ո, please expla	in (use addii	ional paper if ne	ecessary).		
Current driver's license	: State	License #			Cla	ass	
	EN	MPLOYME	NT HIST	ORY			
Present Employer							
Address							
Str	reet		City		State	Ziţ)
Employed from	to			_ Job title			
mont	th/day/year	month/day	/year				
Start salary \$	Current Sa	alary \$		Other compen	sation		
Major Duties							
Why do you want to cha	ange jobs?						
Supervisor's name and	telephone number						
May we contact your en	• •		Yes				
*If no explain why:							
Were you subject to the	Federal Motor Carrie	r Safety Regula	ations (FMC	SRs) while empl	oyed by the	previous er	nployer?
] No
Was the previous job po	osition designated as	a safety sensit	ive function	in any DOT reg	ulate mode,	subject to a	alconol
Controlled substances t	testing requirements	as required by	49 CFR Part	40?	ı	[] Yes	
Controlled substances t							[] No
							[] No
Prior Employer							[] No
Prior Employer							[] No
Prior Employer AddressStr	reet to						[] No
Prior Employer AddressStr			City				[] No
Prior Employer Address Str Employed from mont	reet toth/day/year	month/day	City /year	_ Job title	State	Ziţ	[] No
Prior Employer Address Str Employed from mont Start salary \$	reet to th/day/year Current Sa	month/day	City /year	_ Job title	State	Zip	[] No
Prior Employer Address Str Employed from mont	reet to to th/day/year Current Sa	month/day	City //year	_ Job title	State ensation	Ziţ	[] No
Prior Employer Address Str Employed from mont Start salary \$ Major Duties Why do you want to cha	reet to th/day/year Current Sa	month/day	City /year	_ Job title	State	Ziţ	[] No
Prior Employer Address Str Employed from mont Start salary \$ Major Duties	reet to to th/day/year Current Sa ange jobs? telephone number	month/day	City //year	_ Job title	State ensation	Ziţ	[] No
Prior Employer Address Str Employed from mont Start salary \$ Major Duties Why do you want to cha Supervisor's name and	reet to to th/day/year Current Sa ange jobs? telephone number	month/day	City /year	_ Job title	State ensation	Ziţ	[] No
Prior Employer Address Str Employed from mont Start salary \$ Major Duties Why do you want to cha Supervisor's name and Reason for leaving:	reet to th/day/year Current Sample jobs? telephone number Federal Motor Carrie	month/day alary \$ r Safety Regula a safety sensit	City //year ations (FMC	Job title Other composition SRs) while emplein any DOT regi	State ensation	Zip previous er	nployer?
Prior Employer Address Str Employed from mont Start salary \$ Major Duties Why do you want to cha Supervisor's name and Reason for leaving: Were you subject to the Was the previous job po	reet to th/day/year Current Sample jobs? telephone number Federal Motor Carrie	month/day alary \$ r Safety Regula a safety sensit	City //year ations (FMC	Job title Other composition SRs) while emplein any DOT regi	State ensation oyed by the late mode,	Zip previous er] Yes [subject to a	nployer?
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Prior Employer Address Str Employed from mont Start salary \$ Major Duties Why do you want to cha Supervisor's name and Reason for leaving: Were you subject to the Was the previous job po	reetto th/day/year Current Sate of the second sec	month/day alary \$ or Safety Regula a safety sensit	City /year ations (FMC	Job title Other composition SRs) while empl in any DOT regi	State ensation oyed by the ulate mode,	previous er] Yes [subject to a	mployer?

PROFESSIONAL REFER	RENCES (Referenc	(References should be able to commer		ment on your prior work experience)			
Name/Company	Address	City/State/Zip Code	Telephone Number	Years Known			

EDUCATION				
Name	City/State/Zip Code	Course/Degree	Number of Years Completed	
High School			•	
College or vocational School				
Graduate or other school				
		,		

SKILLS SUMMARY

Describe any other experience, skills, or qualifications that you feel would help you perform the job for which you are applying

APPLICANT STATEMENT

PLEASE READ CAREFULLY!

Unless otherwise clear from the context, the use in Applicant Statement of "the Company" refers to Sherwood Freightliner, Sterling, & Western Star (SFSWS)

In completing and signing this application for employment and any supplements to this application, I understand that any misrepresentation or omission of the facts is cause for cancellation of this application or separation from the Company's service, if I am employed. I agree that the Company shall not be liable in any respect if my employment is terminated because of the falsity of statements made by me on this application.

I understand further that information concerning my past record may be sought from my previous employers and other sources, and I hereby release from all liability or damages those individuals, corporations, or organizations providing such information. I understand any such information provided shall become the exclusive property of the Company. I understand that any offer is conditional upon the results of such background checks.

I understand further that the Company has a drug-free and alcohol-free policy. I agree to comply with the policy and, as a condition of my employment, will consent to a drug test. I understand that any offer of employment is conditional upon the results of the drug test. I consent to undergo a random drug test or any such future tests as may be required by the Company.

I understand further that I may be required to undergo a medical examination for certain positions, and as a condition of my employment, I consent to undergoing such examination and/or test, as may be required by the Company. I understand that any offer of employment is conditional upon the results of such examination and/or test.

Moreover, I understand that the Company has a smoke-free policy and that smoking is permitted only in specific outdoor locations. I agree to comply with all aspects of this policy, if employed by the Company.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the Company and me or to provide me with any other benefit. I further understand that nothing contained in any Company handbook, manual, rule or regulation, practice, policy, etc. creates an employment contract, express or implied, between the Company and me. I agree that if I am employed by the Company, I shall be an employee-at-will, unless different terms are agreed to in writing by an officer of the Company designated for that purpose. I also agree that if I am employed as an employee-at-will, I have the right to terminate my employment without cause and without notice as of any time, and that the Company also has the same right.

If I am offered employment, I will, as condition of employment. Be required to submit proof of my identity and legal right to work in the U.S. The facts set forth in this application are true and correct. I understand that if employed, any false or misleading statements, omissions, or failure to fully answer any questions may result in my dismissal, regardless of when such information is discovered. This certifies that I have read the above, understand and agree to it, and that all entries made by me are true and correct.

Signature of Applicant Date	
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