Local/Shop Employment Application

(660)747-8128 801 W. Young St., Box 47, Warrensburg, MO www.carlylevanlines.com

In compliance with Federal and State equal opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or non-job disability.

Applicant Information

Name: _____ Date: _____
Last First M.I.

Current address: _____
Number Street City State Zip Code

How long have you lived at your current address? _____ Phone number: _____

E-mail address: _____

If under the age of 18, please list age: _____ Are you a U.S. citizen? ☐ Yes ☐ No

Have you ever been previously employed by Carlyle? ☐ Yes ☐ No

Position for which you are applying: _____ Salary desired: _____

What type of employment are you seeking? ☐ Full-time ☐ Part-time ☐ Full- or Part-time

Have you ever served in the Armed Forces? ☐ Yes ☐ No If yes, How many years did you serve? _____

If yes, in which branch did you serve? _____

Are you willing to submit to a controlled substance test? ☐ Yes ☐ No

Would you need any accommodation to perform the essential functions of the job? ☐ Yes ☐ No

If yes, describe any accommodation you may need: _____

If necessary, are you willing to work nights, weekends, and holidays? ☐ Yes ☐ No ☐ Sometimes

Education/Experience

What is the highest level of education you have successfully completed? ☐ High School/GED

☐ Some college (20 hours or more) ☐ College Degree/Trade School Certification

Name of School or Certifying Institution: _____ Location: _____
City State

Number of years/hours completed: _____ OR Type of degree or concentration: _____

Please select the programs and office duties with which you have experience:

☐ Auto mechanics	☐ Packing household goods	☐ Concrete
☐ Auto body	☐ Heavy machine operations	☐ Riding/Push lawn mowers
☐ Auto refinishing	☐ General welding	☐ Chain saw
☐ Heavy machine repair	☐ Mig welding aluminum	☐ Plumbing
☐ Commercial vehicle operation	☐ Sheet metal	☐ Roofing
☐ Diagnose, adjust, repair vehicles	☐ Carpentry	☐ Car detailing
☐ Cat/Detroit/Cummins diagnostics	☐ Brick laying	☐ Carpet/Floor installation
☐ ABS machine operations	☐ Electrician	☐ Carpet cleaning
☐ Machinist	☐ Repair electric and mechanic equip.	☐ Landscaping
☐ Forklift operation	☐ Masonry	☐ Farm equipment

References

Please list three references who we may contact and have experienced your work performance:

Name: _____ Company: _____ Position: _____ Phone number: _____

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Work History

Employer			Date	
Name			From (Mo./Yr.)	To (Mo./Yr.)
Address			Position Held	
City	State	ZIP	Salary/Wage	
Contact Person:		Phone #	Reason for Leaving	

Employer			Date	
Name			From (Mo./Yr.)	To (Mo./Yr.)
Address			Position Held	
City	State	ZIP	Salary/Wage	
Contact Person:		Phone #	Reason for Leaving	

Employer			Date	
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Address			Position Held	
City	State	ZIP	Salary/Wage	
Contact Person:		Phone #	Reason for Leaving	

Additional Information

Please use the space below to summarize and explain any qualifications, experience, or pertinent information you feel we may have missed on this application, or for which you would like to provide more information.

I,_____________________________, certify that this application was completed by me, and that all entries on it

Print your name here

and information in it are true and complete to the best of my knowledge. In the event of my employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Company.

SIGNATURE:_______________________________ DATE: ________________