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**APPLICATION FOR EMPLOYMENT**

**Today’s Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

Equal access to programs, service, and employment is available to all persons. Those applicants requiring reasonable accommodation to complete the application and/or interview process should notify the interviewer or a representative of the Human Resources Dept.

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Middle Last

Social Security # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_

Present Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City State Zip

Home Telephone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cellular #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you lived in the area? \_\_\_\_\_\_\_ Years\_\_\_\_\_\_\_ Months

**Geographical Knowledge:**

Circle the areas you are familiar with: Destin Fort Walton Beach Sandestin Pensacola Panama City

**General**

Position applied for\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Part-time\_\_\_\_\_\_\_\_ Full-time\_\_\_\_\_\_\_

Are you 18 years of age or older? \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No

Are you able to work a night shift, late night, or weekends if needed? \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No

Are you willing and able to meet travel requirements? \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No

Have you been previously employed by 654Limo? \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No

Are you employed now? \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No

Have you previously applied for work here? \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No

*If yes, date*\_\_\_\_/\_\_\_\_/\_\_\_\_

Are you legally eligible for employment in this country? \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No

If applicable, please list visa type, visa #, and expiration date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s license number :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 State

How did you hear about this position? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date available for work: \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you ever been convicted of or pled guilty to a felony or misdemeanor which has not been expunged, annulled, sealed or statutorily eradicated by the Court? Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_

If yes, date\_\_\_\_/\_\_\_\_/\_\_\_\_

A conviction or plea of guilty will not necessarily be a bar to employment. Please describe the nature of the conviction or guilty plea and your rehabilitation since that time \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Conviction will not necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.

**Military Service Record**

Have you served in the Armed Forces of the United States? \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No

Branch of Service \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of entry\_\_\_\_/\_\_\_\_/\_\_\_\_Date of discharge\_\_\_\_/\_\_\_\_/\_\_\_\_

Military training/awards received\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Education**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Institution** | **Address/City/State** | **Major** | **Last Year Completed** | **Degree** |
| High School/Preparatory |  |  |  |  |
| College/Tech School |  |  |  |  |

List scholastic honors, offices held, and activities in college: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Employment History**

To drive in interstate commerce all driver applicants must provide the following information on all employers during the last three years.
List complete mailing address, street number, city, state, and zip code.

\* Include vehicles having a GVWR of 26,001 lbs. or more, vehicles designed to transport 15 or more passengers, or any size vehicle used to transport hazardous materials in a quantity requiring placarding. List employers in reverse order - starting with the most recent. Add another sheet as necessary.

Employer / Company Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date Employed**

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ From:\_\_\_\_/\_\_\_\_/\_\_\_\_

City, State, Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Rate of Pay**

Job Title & Duties\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Starting: $\_\_\_\_ per\_\_

Reason for Leaving\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ending: $\_\_\_\_\_per\_\_

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can we contact this employer? Yes/No

Employer / Company Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Da**te Employed**

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ From:\_\_\_\_/\_\_\_\_/\_\_\_\_

City, State, Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Rate of Pay**

Job Title & Duties\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Starting: $\_\_\_\_ per\_\_

Reason for Leaving\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ending: $\_\_\_\_\_per\_\_

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can we contact this employer? Yes/No

Employer / Company Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Da**te Employed**

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ From:\_\_\_\_/\_\_\_\_/\_\_\_\_

City, State, Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Rate of Pay**

Job Title & Duties\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Starting: $\_\_\_\_ per\_\_

Reason for Leaving\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ending: $\_\_\_\_\_per\_\_

Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can we contact this employer? Yes/No

Describe any skills you have: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Languages Spoken (other than English)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Unemployment Record**

Account for all periods of unemployment of 1-month duration or more since you left school (or last 3 years) until the present time.

|  |  |  |
| --- | --- | --- |
| **From** | **To** | **State What you Were Doing** |
| Mo. Yr. | Mo. Yr. |  |
| Mo. Yr. | Mo. Yr. |  |

Continue on next page

**References**

 List name and telephone number of three business/work references who are not related to you.

|  |  |  |
| --- | --- | --- |
| **Name** | **Telephone** | **Years Known** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |

**Driving Policy**

No applicant will be hired into a position that requires driving as a key aspect of the position unless requirements have been met. Applicants must have a valid driver’s license.

Applicants may be disqualified for employment or driving positions if:

1. If the applicant’s driver’s license is currently suspended, revoked, or cancelled, including for administrative reasons (non-safety related).

2. Drivers indicate at risk driving behaviors by evidence of records, call in complaints, direct observation by company employees, preventable collisions or any other valid source.

I understand the importance of driving defensively safely and that if 654 Limo determines my driving record indicates evidence of at risk driving, as described above, my employment can be terminated.

**Applicant’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date**\_\_\_\_/\_\_\_\_/\_\_\_\_

Continue on next page

**Please Read Before Signing:**

This Employment Application will remain active for 90 days. If you are hired by 654Limo, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

As required by the Americans with Disabilities Act: During the interview process you may be asked about your ability to perform job-related functions. I f you are made a conditional offer of employment you may be required to complete a post-job offer medical history questionnaire and/or undergo a medical examination. All candidates for the same job will be subject to the same medical
questionnaire and/or examination and all such information will be kept confidential and in separate files.

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by 654Limo.

I understand that any employment is conditioned on a background check. I authorize 654Limo to thoroughly investigate all statements contained in my application or resume, and I authorize my former

employers and references to disclose information regarding my former employment, character and general reputation to 654Limo, without giving me prior notice of such disclosure.

I understand and agree that nothing contained in this application, or conveyed during my interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be “at will” and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or 654Limo. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon 654Limo unless made in writing.

If I am offered employment I agree to submit to a drug test before starting work. If employed, I also agree to submit to a drug test at any time deemed appropriate by 654Limo and as permitted by law. I consent to such testing and I request that the examining doctor disclose to 654Limo the results of the examination, which results shall remain confidential and segregated from my personnel file. Furthermore, I agree to submit to a drug test at any time deemed appropriate by 654Limo and as permitted by law. I consent to
such testing and I request that the examining doctor disclose to 654Limo the results of the examination, which results shall remain confidential.

I understand that filling out this form does not indicate there is a position open and does not obligate 654Limo to hire. If hired, I agree to abide by all 654Limo work rules, policies, and procedures. 654Limo retains the right to revise its policies or procedures, in whole or in part, at any time.

I understand these terms.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicants Name (Print) Applicants Signature Date