



EasTex Tower
7345 Templeton Gap Rd.
Colorado Springs, CO 80923
Phone: 719-632-8822 Fax: 719-632-6848

Employment Application and Authorization to Release Records

I understand and agree that: The information supplied was submitted by myself, and all information is true and correct, to the best of my knowledge. I understand that false or misleading information given in my application and/or interview(s) will be considered as cause for possible dismissal and/or discharge. I also understand that I am to abide by all rules and regulations of EasTex Tower, Inc. EasTex Tower, Inc. has my authorization to thoroughly investigate my work and personal history. I understand that the information supplied by me, regarding my: Employment History, Education (including an authorization to release transcripts), Credit History, Criminal History, Medical and Professional Licensing, Motor Vehicle Record(s), Residence History, and References, will be utilized as part of the processing procedures. A background check will be conducted to verify the veracity of the information submitted and will be utilized to develop information concerning my character, general reputation, personal characteristics, and mode of living. I will hold no person liable for giving or receiving information in this investigation. I hereby authorize SentryLink, LLC, an agent of EasTex Tower, Inc., to make a thorough check of my past employment, education, and activities.

I release from liability all persons, companies, and corporations supplying that information.

I release and indemnify EasTex Tower, Inc. and SentryLink, LLC against any liability that might result from making such background checks. A copy of this form is as valid as the original.

I authorize EasTex Tower, Inc. to conduct a Motor Vehicle Record Check and I understand that in obtaining such reports, a consumer reporting agency may be used and I do hereby authorize such use. I further acknowledge and agree that the reports may be procured by EasTex Tower, Inc. insurance carrier to provide an assessment of my insurability under EasTex Tower, Inc. insurance coverages. This Authorization is pursuant to the terms and conditions under the Fair Credit Reporting Act.

Nothing on this application is intended to create or imply employment; if hired the employee understands that employment is at will, and is not for a specific time, and can be terminated at will.

Full Name: _____
First M.I. Last

Address: _____ No. of Years? _____
Street City State & Zip

Social Security #: _____ - _____ - _____ Driver's License #: _____

Phone #: _____ Email Address: _____

Date Available: _____ Desired Rate of Pay: _____

Are you a citizen of the United States? Yes No If no, are you authorized to work in the US? Yes No

Have you ever worked for this company? Yes No If so, when? _____

Have you ever been convicted of a felony? Yes No If yes, explain: _____

Education

High School: _____ Did you Graduate? Yes No

College: _____ Did you Graduate? Yes No

Degree? _____

Other: _____ Did you Graduate? Yes No

Military Service

Have you served in the military? Yes No

Are you currently Active? Yes No

Previous Three Years Residency

Street: _____ City: _____ State & Zip: _____ How Long? _____

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Experience & Qualifications Driver

	State	License No.	Type	Expiration Date
Driver Licenses				

Class of Equipment	Type of Equipment (Van, tank, Flat, Etc.)	Dates From / To	Approx. # of Miles
Straight Truck		/	
Tractor and Semi-Trailer		/	
Tractor - Two Trailers		/	
Other		/	

Traffic Convictions & forfeitures for the past 3 years (other than parking violations)	Location	Date	Charge	Penalty

Accident Record for past 3 years or more (attach sheet if more space is needed)

Dates	Nature of Accident (head-on, rear-end, rollover, etc.)	# of Fatalities	# of Injuries	Chemical Spills?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Have you ever been denied a license, permit or privilege to operate a motor vehicle Yes No

If yes, explain: _____

Has any license, permit or privilege ever been suspended or revoked? Yes No

If yes, explain: _____

Previous Employment

Company: _____ Supervisor: _____

Address: _____ Phone #: _____

Position Held: _____ From _____ To _____ Salary _____

Responsibilities: _____

Reasons for Leaving: _____

Were you subject to the Federal Motor Carrier Safety Regulations while employed by the previous employer? Yes No

Was the previous job position designated as a safety sensitive function in any DOT regulated mode, subject to alcohol and controlled substances testing requirements as required by 49 CFR Part 40? Yes No

Company: _____ Supervisor: _____

Position Held: _____ From _____ To _____ Salary _____

Responsibilities: _____

Reasons for Leaving: _____

Were you subject to the Federal Motor Carrier Safety Regulations while employed by the previous employer? Yes No

Was the previous job position designated as a safety sensitive function in any DOT regulated mode, subject to alcohol and controlled substances testing requirements as required by 49 CFR Part 40? Yes No

Company: _____ Supervisor: _____

Address: _____ Phone #: _____

Position Held: _____ From _____ To _____ Salary _____

Responsibilities: _____

Reasons for Leaving: _____

Were you subject to the Federal Motor Carrier Safety Regulations while employed by the previous employer? Yes No

Was the previous job position designated as a safety sensitive function in any DOT regulated mode, subject to alcohol and controlled substances testing requirements as required by 49 CFR Part 40? Yes No

References

Please list three professional references

Full Name: _____ Relationship: _____

Company: _____ Phone #: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone #: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone #: _____

Address: _____

Disclaimer & Signature

The following information is used for identification and statistical purposes. It is not used in any manner considered discriminatory under EEOC guidelines. EasTex Tower, Inc. considers applications without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Signature: _____ Date: _____

SAVE

PRINT

Please either:

>> SAVE the form BEFORE you fill it in, then complete it & attach it to an email to employment@ettower.com

>> OR print, complete & fax to 719-632-6848.