



PO Box 125  
Dell Rapids, SD 57022  
877.428.4798 - Toll-Free Phone  
605.428.4777 - Local Phone  
605.428-4767 - Fax  
www.PrairieCoach.com

## APPLICATION FOR EMPLOYMENT

**Applicant: Read and sign before submitting this application.**

**Prairie Coach Trailways, Inc., does not discriminate in hiring or employment on the basis of race, color, religion, sex, national origin, Vietnam era veteran status, special disabled veteran status, disability, age or any other characteristic protected by local, state or federal law.**

Name

Address

City

State

Zip Code

Date:

Signed \_\_\_\_\_



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Position Applying For: \_\_\_\_\_ Date: \_\_\_\_\_

Name \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Address \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Social Security #: Required for driving positions...we will call

Country \_\_\_\_\_ Email \_\_\_\_\_

Rate of Pay Expected: \_\_\_\_\_  Temporary  Part Time  Full Time

Who Referred you? \_\_\_\_\_

Have you ever worked for Prairie Coach before?  From: \_\_\_\_\_ To: \_\_\_\_\_

Do you have any relatives employed by Prairie Coach?

Are you currently employed?  If not, how long since leaving your last employment? \_\_\_\_\_

### EDUCATION

Highest level of education completed: \_\_\_\_\_ Last school attended: \_\_\_\_\_

### GENERAL

Have you ever been bonded?  Name of bonding company: \_\_\_\_\_

In the last 7 years, have you been convicted of a crime (or plead no contest) for any offense or violation other than a minor traffic violation?  Yes  No

If yes, please explain: \_\_\_\_\_

Do you have any pending criminal charges against you?  Yes  No

If yes, please explain: \_\_\_\_\_

### EXPERIENCE & QUALIFICATIONS (answer the questions in this section only if applying for a driver position)

Date of Birth: \_\_\_\_\_ The U.S. Department of Transportation requires that driver applicants state their date of birth.

**Traffic Convictions and Forfeitures for the past 3 years other than parking violations.**

Location	Date	Charge	Penalty

**Employment Record**

The U.S. Department of Transportation requires that driver applications show all employment for the past three years. They must also show commercial driver employment for the seven years immediately preceding this three year period.

Start with last or current position, including military experience, and work back. (Submit a separate sheet of paper if necessary)

Current Employer:  Supervisors Name:   
 Full Address:  Phone:   
 State:  Zip Code:  From:  To:   
 Position Held:  Salary:   
 Reason For Leaving:

Company:  Supervisors Name:   
 Full Address:  Phone:   
 State:  Zip Code:  From:  To:   
 Position Held:  Salary:   
 Reason For Leaving:

Company:  Supervisors Name:   
 Full Address:  Phone:   
 State:  Zip Code:  From:  To:   
 Position Held:  Salary:   
 Reason For Leaving:

**Platform Experience & Qualifications**

List types of platform experience & # of years each   
 List platform equipment you can operate (lift truck)   
 List courses or training in platform work

### Applicant must read and sign!

I certify that I have read and understood all of this employment application. It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other persons named herein from all liability for any damages on account of furnishing such information. I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

I further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the employer and for no other reason.

It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include an Investigative Consumer Report, including information regarding my character, general reputation, personal characteristics, and mode of living.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I also understand that misrepresentation or omission of information or facts may result in my rejection or dismissal.

If hired, I agree to abide by all the rules and policies of the employer.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

By initialing this box, you are certifying that you have provided this information yourself and have read and understood the conditions set forth above.

Date:

### FAIR CREDIT REPORTING ACT DISCLOSURE STATEMENT

In accordance with the provisions of Section 604(b)(2)(A) of the Fair Credit Reporting Act, (Public Law 91-508), as amended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter I, of Public Law 104-208), you are being informed that a consumer report may be obtained on you for employment purposes.

I acknowledge the receipt of the above disclosure and authorize the above-named company to obtain a consumer report on me for employment purposes. This authorization is ongoing in the event such a report is needed in the future.

By initialing this box, you are certifying that you have read and understood the statement above.

Date:

Please list 3 references that we may call on your behalf.

Name	Adress	Phone	Years Known