



APPLICATION FOR EMPLOYMENT

Name _____

Date _____

Position(s) Desired: (do not list "any")

1 _____

2 _____

3 _____

Corporate Office

P.O. Box 1672 ☐ Van Buren, AR 72957 ☐ (479)474-7222 ☐ Fax (479)471-7964

APPLICATION FOR EMPLOYMENT

Date: _____ POSITION APPLIED FOR: _____

Referred by: _____ Date Available for Work: _____

INSTRUCTIONS: Please read carefully. Every item on this form must be answered to the best of your ability. Please print and use a pen. Your qualifications will be carefully reviewed and you will be given thorough consideration for any suitable vacancy. Upon employment, this application will become part of your permanent record at TLS. Keep this in mind as you complete it. Special Note: You are not required to supply any information that is prohibited by Federal, State or Local law. We are an Equal Opportunity Employer. TLS seeks to attract and retain a high performing and diverse workforce in which employees' differences are respected and valued to better meet the varying needs of the diverse customers we serve. TLS fosters a diverse and inclusive work environment that promotes collaboration, flexibility and fairness to all. TLS does not discriminate on the basis of race, color, religion, gender, national origin, pregnancy, marital status, citizenship, age, disability or any other legally protected class. You may request assistance in completing this application.

PERSONAL

Name _____ Telephone Number () _____
First M.I. Last

Date of Birth _____ Social Security Number _____

Street _____ Box _____ City _____ ST _____ Zip _____

Emergency Contact _____ Phone # _____ Relationship _____

If younger than 18, state your age here _____ Are you legally entitled to work in the United States? ** ___ Yes ___ No

**Compliance with I-9 requirements is mandatory, upon employment

If convicted of a crime(s), explain here: _____ No convictions

Answer these questions for all positions requiring the use of a vehicle:

Have you ever been convicted of a moving traffic violation? ___ Yes ___ No If yes, list all here: _____

Have your driving privileges ever been revoked or suspended? ___ Yes ___ No If yes, list here: _____

Do you currently hold a Commercial driving license? ___ Yes ___ No

EDUCATION

High School (Name and Address) _____

Did you graduate? _____ If no, last grade completed _____ G.E.D Obtained? _____ Grade Average _____

Colleges (Name and Address) _____

Colleges (Name and Address) _____

Did you graduate? _____ If no, number of hours completed _____ Grade Point Average _____ Degree _____

Major _____ Minor _____ If attending, date of graduation _____

Other Education _____

Awards, Honors, Leadership Roles: _____

MILITARY ___ Not applicable

List service in U.S. Military: From _____ to _____ Branch _____

Rank at Discharge _____ Military experience that may be applicable: _____

GENERAL EMPLOYMENT INFORMATION

1. List here all of the equipment with which you have experience and training. (Examples: small tools, forklift, word processor, computers, etc.): _____

2. Are you willing to relocate? _____ If yes, state location preferred: _____

3. Salary Expected: _____/hour or _____/week. Number of hours you are available per week? _____ No Preference _____

4. Type of Employment sought: ___regular full time ___regular part time ___temporary ___seasonal ___as needed

5. Which of the following are you available: Days: ___Yes ___No Nights: ___Yes ___No

Weekends: ___Yes ___No Holidays: ___Yes ___No Shift Work: ___Yes ___No

6. Indicate hours you are available to work on the following days (or check *Anytime* if you have no restrictions)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday
____ to ____ to ____ to ____ to ____ to ____ to ____ to ____
___Anytime ___Anytime ___Anytime ___Anytime ___Anytime ___Anytime ___Anytime

7. Are you able and willing to perform the essential functions of the job for which you are applying, including travel, if necessary?

_____ Yes _____No _____ don't know

*If no, indicate reason: _____need different hours _____need different days _____need more training, Other, (explain accommodation needed:)

EXPERIENCE: List below all present and past employment, beginning with your most recent employer

1. Employer _____ Starting Salary _____ per hour or week
Address _____ Last Salary _____ per hour or week
Kind of Business _____ Supervisor _____
Job Title _____ Reason for Leaving: ___Quit ___Discharge ___Retired
Dates Employed _____ to _____ Laid Off Why? _____
For Job Reference, call _____ at _____
_____ Please do not contact this employer. Why not? _____

2. Employer _____ Starting Salary _____ per hour or week
Address _____ Last Salary _____ per hour or week
Kind of Business _____ Supervisor _____
Job Title _____ Reason for Leaving: ___Quit ___Discharge ___Retired
Dates Employed _____ to _____ Laid Off Why? _____
For Job Reference, call _____ at _____
_____ Please do not contact this employer. Why not? _____

3. Employer _____ Starting Salary _____ per hour or week
Address _____ Last Salary _____ per hour or week
Kind of Business _____ Supervisor _____
Job Title _____ Reason for Leaving: ___Quit ___Discharge ___Retired
Dates Employed _____ to _____ Laid Off Why? _____
For Job Reference, call _____ at _____
_____ Please do not contact this employer. Why not? _____

4. Employer _____ Starting Salary _____ per hour or week
Address _____ Last Salary _____ per hour or week
Kind of Business _____ Supervisor _____
Job Title _____ Reason for Leaving: ___Quit ___Discharge ___Retired
Dates Employed _____ to _____ Laid Off Why? _____
For Job Reference, call _____ at _____
_____ Please do not contact this employer. Why not? _____

In the following space, please describe briefly why you are applying for this position:

In the following space, please describe your strengths and talents and how our company will benefit from your work here.

CONDITIONS OF EMPLOYMENT

- I. The facts as stated on this application are true and correct. I understand that, if employed, false statements on this application may cause my immediate dismissal.
- II. I authorize such background and personal reports as deemed necessary to verify that the information I have supplied is true and accurate and to determine my fitness for this job and hold harmless those who have the responsibility to develop such a report. A copy of this authorization is as valid as the original.
- III. I understand that I may be required to work overtime as a condition of being employed.
- IV. In consideration of my employment, I agree to conform to the rules and regulations for employees. I understand I am an employee at will, and that this application is not a contract of employment with TLS and that my employment and compensation can be terminated, with or without cause, at any time, at the option of either TLS or me. I understand that no representative of TLS has any authority to enter into any verbal agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and that no document, policy or practice of TLS may change the foregoing unless it is expressly titled "Employment Agreement" and signed by both myself and an officer of TLS.
- V. I understand that I may be required to submit to a pre-employment and post-employment test for fitness and/or substance abuse, if not prohibited by law.
- VI. Upon separation of employment, I authorize TLS to withhold from my final paycheck any monies owed to them by me (if not prohibited by law) for equipment, loans, products, services, materials or other assets in my possession not promptly returned.

DATE: _____ SIGNATURE: _____