

The Parks Companies Driver Application



Employment Application *Equal Opportunity Employer

1. Print in ink or type.
2. Answer all questions completely.
3. Resumes will not be accepted in lieu of applications.
4. At the time of employment, you must submit proof of U.S. citizenship or authorization to work in the United States.
5. False statements or omission of material facts will result in rejection of your application or removal from employment after hire.

Position Applied For: Truck Driver	Date of Application:
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PERSONAL INFORMATION

Name: _____ Home Phone: _____

Address: _____ Work Phone: _____

_____ E-mail Address: _____

City, State Zip: _____

Date of Birth (Required for ALL Commercial Drivers): _____ Referred By: _____

Driver License #: _____ Driver License State of Issue: _____

EDUCATION AND TRAINING

Please include any training relative to the position you are applying for, including military.

High School Diploma/GED certificate (yes or no): _____

Colleges, Vocational or Technical Schools, Training Centers	Major Subject	Number of Credits Earned	Type of Degree or Certificate	Date

ADDITIONAL INFORMATION

Salary/wage requirements? _____ Have you ever been employed by an affiliate of The Parks Companies? _____

Do you have any relatives employed by The Parks Companies? _____

Do you have a legal right to work in the United States? _____ Have you been TQA Certified and when? _____

How many years of livestock hauling experience do you have? _____ How many years of Tractor Trailer driving experience do you have? _____

Have you ever been discharged or requested to resign from any position for misconduct or unsatisfactory service? _____

If yes, explain: _____

Have you ever been convicted of a criminal offense? _____

If yes, explain: _____

PERTINENT SPECIAL SKILLS

List experience with livestock, customer service, clerical experience or other special skills which are pertinent to the job for which you are applying.

WORK EXPERIENCE

Beginning with your most recent employer, describe all work experience (attach additional sheets if necessary)

Employer Name:		Employer Phone:			
Address:		Supervisor:			
		Your Job Title:			
City, State Zip:		From (mm/yy):		To (mm/yy):	
Salary or Wage:		Average Hours Worked/Week:			
Reason for Leaving:					
Major Duties of Job:					
May we contact this employer?					

Employer Name:		Employer Phone:			
Address:		Supervisor:			
		Your Job Title:			
City, State Zip:		From (mm/yy):		To (mm/yy):	
Salary or Wage:		Average Hours Worked/Week:			
Reason for Leaving:					
Major Duties of Job:					
May we contact this employer?					

Employer Name:		Employer Phone:			
Address:		Supervisor:			
		Your Job Title:			
City, State Zip:		From (mm/yy):		To (mm/yy):	
Salary or Wage:		Average Hours Worked/Week:			
Reason for Leaving:					
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Employer Name:		Employer Phone:			
Address:		Supervisor:			
		Your Job Title:			
City, State Zip:		From (mm/yy):		To (mm/yy):	
Salary or Wage:		Average Hours Worked/Week:			
Reason for Leaving:					
Major Duties of Job:					
May we contact this employer?					

Employer Name:		Employer Phone:			
Address:		Supervisor:			
		Your Job Title:			
City, State Zip:		From (mm/yy):		To (mm/yy):	
Salary or Wage:		Average Hours Worked/Week:			
Reason for Leaving:					
Major Duties of Job:					
May we contact this employer?					

ACCIDENT REPORT HISTORY

Accident Record for the past three years.

Date	Nature of Accident (Head-On, Rear-End, Etc.)	Fatalities	Injuries	Hazardous Material Spill

TRAFFIC VIOLATIONS

Traffic Convictions and Forfeitures for the Past 3 Years (Do not include Parking)

Location	Date	Charge	Penalty

DRIVING EXPERIENCE

Class of Equipment (Straight Truck, Tractor Trailer, Etc.)	Type of Equipment (Van, Livestock Trailer, Reefer, Etc.)	Dates		Approximate Total Mileage
		From (mm/yy)	To (mm/yy)	

I certify that all information given in this job application is true and complete to the best of my knowledge. I understand that any statement that is false, fraudulent or misleading may result in the rejection of my application, denial of employment, and dismissal from service if discovered after employment.

Signature

Date

MANDATORY USE FOR ALL ACCOUNT HOLDERS

**IMPORTANT NOTICE
REGARDING BACKGROUND REPORTS FROM THE PSP Online Service**

1. In connection with your application for employment with **Parks Livestock, Inc.** (“Prospective Employer”), Prospective Employer, its employees, agents or contractors may obtain one or more reports regarding your driving, and safety inspection history from the Federal Motor Carrier Safety Administration (FMCSA).

When the application for employment is submitted in person, if the Prospective Employer uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, the Prospective Employer will provide you with a copy of the report upon which its decision was based and a written summary of your rights under the Fair Credit Reporting Act before taking any final adverse action. If any final adverse action is taken against you based upon your driving history or safety report, the Prospective Employer will notify you that the action has been taken and that the action was based in part or in whole on this report.

When the application for employment is submitted by mail, telephone, computer, or other similar means, if the Prospective Employer uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, the Prospective Employer must provide you within three business days of taking adverse action oral, written or electronic notification: that adverse action has been taken based in whole or in part on information obtained from FMCSA; the name, address, and the toll free telephone number of FMCSA; that the FMCSA did not make the decision to take the adverse action and is unable to provide you the specific reasons why the adverse action was taken; and that you may, upon providing proper identification, request a free copy of the report and may dispute with the FMCSA the accuracy or completeness of any information or report. If you request a copy of a driver record from the Prospective Employer who procured the report, then, within 3 business days of receiving your request, together with proper identification, the Prospective Employer must send or provide to you a copy of your report and a summary of your rights under the Fair Credit Reporting Act.

The Prospective Employer cannot obtain background reports from FMCSA unless you consent in writing.

If you agree that the Prospective Employer may obtain such background reports, please read the following and sign below:

2. I authorize Parks Livestock, Inc. (“Prospective Employer”) to access the FMCSA Pre-Employment Screening Program (PSP) system to seek information regarding my commercial driving safety record and information regarding my safety inspection history. I understand that I am consenting to the release of safety performance information including crash data from the previous five (5) years and inspection history from the previous three (3) years. I understand and acknowledge that this release of information may assist the Prospective Employer to make a determination regarding my suitability as an employee.

3. I further understand that neither the Prospective Employer nor the FMCSA contractor supplying the crash and safety information has the capability to correct any safety data that appears to be incorrect. I understand I may challenge the accuracy of the data by submitting a request to <https://dataqs.fmcsa.dot.gov>. If I am challenging crash or inspection information reported by a State, FMCSA cannot change or correct this data. I understand my request will be forwarded by the DataQs system to the appropriate State for adjudication.

4. Please note: Any crash or inspection in which you were involved will display on your PSP report. Since the PSP report does not report, or assign, or imply fault, it will include all Commercial Motor Vehicle (CMV) crashes where you were a driver or co-driver and where those crashes were reported to FMCSA, regardless of fault. Similarly, all inspections, with or without violations, appear on the PSP report. State citations associated with FMCSR violations that have been adjudicated by a court of law will also appear, and remain, on a PSP report.

I have read the above Notice Regarding Background Reports provided to me by Prospective Employer and I understand that if I sign this consent form, Prospective Employer may obtain a report of my crash and inspection history. I hereby authorize Prospective Employer and its employees, authorized agents, and/or affiliates to obtain the information authorized above.

Date: _____ Signature: _____
Name (Printed): _____

NOTICE: This form is made available to monthly account holders by NICT on behalf of the U.S. Department of Transportation, Federal Motor Carrier Safety Administration (FMCSA). Account holders are required by federal law to obtain an Applicant’s written or electronic consent prior to accessing the Applicant’s PSP report. Further, account holders are required by FMCSA to use the language provided in paragraphs 1-4 of this document to obtain a prospective Applicant’s consent. The language must be used in whole, exactly as provided. **The language may be included with other consent forms or language at the discretion of the account holder, provided the four paragraphs remain intact and the language is unchanged.**