

JOB APPLICATION FORM

ARIZONA ALLIED EXPERT MOVERS

Application for employment – Professional Mover

The continuing success of our company is due in large part to our reputation for reliability and trustworthiness. Because we send employees into customer's homes – frequently– it is absolutely essential that we hire only those with the cleanest records and the most upstanding character. Please answer each item accurately and completely. Failure to do so may result in you not being considered for the job, or in termination at any time after you are hired if we find this application was not filled out completely and honestly.

In addition, since this job position requires that you operate a company vehicle or customers vehicle you must agree to participate in a program of testing for the use of illegal drugs and of reviews of your driving record.

“I give permission for a pre-employment drug screening test and for any such recurring tests as may be requested by the company at any time.”

Signed: _____

“I authorize the company to request an investigative report from a background checking agency concerning my social security number, motor vehicle operation history, criminal history and other information to the extent permitted by law from appropriate local, state and federal agencies and other available public records.”

Signed: _____

Identifying Information

- Name of applicant:
- Date of application:
- Street address:
- City & ZIP:
- How long have you lived at this address?
- Previous address in the past 10 years: (continue on reverse if necessary)

- Primary telephone number:
- Alternate telephone number:
- E-Mail address:
- SSN:
- Driver's license number:

Are you currently employed? Yes No
 If yes, may we contact your employer? Yes No
 Contact information:

Are you currently on lay-off status and subject to recall? Yes No

Can you provide proof of authorization to work in the U.S.? Yes No

Referring to the “Physical Demands” and “Working Conditions” sections of the “Job Description – Professional Mover,” will you be able, with reasonable accommodation, to physically and emotionally perform the job for which you are applying?
 Yes No

Education
 (use reverse side if necessary)

Name & City of High School:
 Graduated: Yes No

Other education:

Technical Training
 (use reverse side if necessary)

School	Course of study	Hours	Date Completed

Previous Employment – including Military Service
Begin with your current or most recent employer

Employer	Dates employed To From		Work Performed
Address			
Job title	Wages Start Final		
Supervisor			
Reason for leaving			

Employer	Dates employed To From		Work Performed
Address			
Job title	Wages Start Final		
Supervisor			
Reason for leaving			

Employer	Dates employed To From		Work Performed
Address			
Job title	Wages Start Final		
Supervisor			
Reason for leaving			

Other experience you feel qualifies you for this job

References
(No relatives)

Name	
Address	
City, State & ZIP	
Telephone	
Comment	

Name	
Address	
City, State & ZIP	
Telephone	
Comment	

Name	
Address	
City, State & ZIP	
Telephone	
Comment	

Name	
Address	
City, State & ZIP	
Telephone	
Comment	

Important Authorizations

Read each paragraph carefully and initial each before signing the application

“I agree to notify the company immediately of any traffic violations for which I am charged”

Initials _____

“In understand that if hired I may not hold other employment, nor engage in other activities that create a conflict of interest with my position with the company unless given permission in writing by the company.”

Initials _____

“I authorize the investigation of all statements contained in this application and any accompanying documentation, if any, and further authorize any person, school, current or past employer(s) and organizations named in this application form to provide the company with records, information and opinions that may be useful in making a hiring decision. I release all informants from all liability for damage that may result from furnishing information and opinions which are truthful and made in good faith to you.”

Initials _____

“If I accept employment with the company, I agree to comply with the rules, regulations, policies and procedures of the company.”

Initials _____

I certify that all information I have provided in the above application is complete and true.

Signed: _____ Date: _____