

Application For Qualification

Kottke Trucking, Inc
POB 206, 211 Hwy 212 E
Buffalo Lake, MN 55314
800-248-2623

MECHANIC

INSTRUCTIONS TO APPLICANT

Please answer all questions. If the answer to any question is "NO" or "NONE", do not leave it blank, but write "NO" or "NONE." This is important!!!

Date _____

Name _____
(First) (Middle) (Last)

Social Security Number _____

Date of Birth _____ Age _____

Phone Number (____) _____

Account for three years of addresses:

Current Address:

Next Previous Address:

EMPLOYMENT

Give a COMPLETE RECORD of all employment or leased status for the past three years, including any unemployment, self employment, and explain any gaps of employment.

PRESENT OR LAST EMPLOYER:

Name: _____

MO/YR MO/YR

_____ until _____

Address: _____

Fired

Quit

City/State/Zip: _____

Phone: _____

Contact: _____

Reason Left: _____

Wage: _____ based on Hours Salary Other _____

PRESENT OR LAST EMPLOYER:

Name: _____

MO/YR MO/YR

_____ until _____

Address: _____

Fired

Quit

City/State/Zip: _____

Phone: _____

Contact: _____

Reason Left: _____

Wage: _____ based on Hours Salary Other _____

ADD SEPARATE PAPER LISTING ADDITIONAL EMPLOYEMENT WITHIN LAST 3 YEARS

Please fill in the appropriate places, don't leave anything blank

Do you have semi-trailer mechanic experience? Yes No If yes, how many years/months _____

Do you have trailer mechanic experience? Yes No If yes, how many years/months _____

List courses & training in maintenance work:

Job function

Indicate training & experience in the following:	Formal Training (Check)	Years of Experience	Area	Formal Training (Check)	Years of Experience
Drive Line Components			Body Work		
Diesel Engine Tune-up & Rebuild			Electrical Repair		
			Frame & Wheel Alignment		
Gas Engine Tune-up & Rebuild			Brakes		
			Cooling System		
Tire Service			Inspections		
Trailer Repair			General Car Repair		
Air Conditioning					

Shop Equipment

Indicate training & experience in the following:	Formal Training (Check)	Years of Experience	Area	Formal Training (Check)	Years of Experience
Electrical Diagnostic Equipment			Wheel & Tire		
			Balancing Machine		
Sheet Metal Equipment			Tire Recapping Mold		
Frame & Axle Straightening Equip			Engine Dynamometer		
			Chassis Dynamometer		
Engine Rebuilding Equipment			Magnetic Crack Detector		
			Engine Analyzer		
Diesel Injection Equipment			Noise Measuring Equipment		
Electric Welder			Smoke Measuring Equipment		
Oxyacetylene Welder			Inspections		
Paint Spray Gun			General Car Repair		
Air Conditioning					
Tire Servicing Machine					

DRIVING EXPERIENCE

A background in CDL driving is weighted. Please list none if no driving experience.

CLASS OF EQUIPMENT	DATE FROM	DATE TO	APPROX MILES (APPROX
STRAIGHT TRUCK			
TRACTOR AND SEMI-TRAILER			
TRACTOR & 2 TRAILERS			
OTHER List			

Check States Operated In Last Five Years:

- Minnesota North Dakota South Dakota Nebraska Iowa Wisconsin Illinois Indiana
- Missouri Ohio Kentucky Kansas Oklahoma Arkansas Tennessee Texas
- Louisiana Mississippi Alabama Georgia North Carolina South Carolina Virginia
- West Virginia Florida

Show special courses or training that will help you as a driver _____

ACCIDENT RECORD

Attach Sheet if Needed. List all accidents including all preventable and non-preventable accidents

DATES	NATURE OF ACCIDENT (HEAD-ON, REAR-END, UPSET, ETC.)	# OF FATALITIES	# OF PEOPLE INJURED

TRAFFIC CONVICTIONS

Attach Sheet if Needed. List all items on your drivers record. List whether they were moving or non-moving.

DATES	LOCATION (City, State, Road)	CHARGE	PENALTY

DRIVERS LICENSES

List all licenses that you hold or have held in the past three years

STATE	LIC #	TYPE	ENDORSEMENTS	EXP DATE

- A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes No
- B. Has any license, permit, or privilege every been suspended or revoked? Yes No

If you answered yes to either A or B, give details including dates, penalty, why, and any pertaining details:

PERSONAL REFERENCES

List four persons for reference, other than relatives, who have knowledge of your habits.

Name _____

Name _____

Address _____

Address _____

City/State/Zip _____

City/State/Zip _____

Phone _____

Phone _____

Name _____

Name _____

Address _____

Address _____

City/State/Zip _____

City/State/Zip _____

Phone _____

Phone _____

TRADE/CREDIT REFERENCES

List two trade references that can detail your financial standing, including your truck loan.

Name _____

Name _____

Address _____

Address _____

City/State/Zip _____

City/State/Zip _____

Phone _____

Phone _____

GENERAL

Please tell us more about yourself

Have you ever filed for bankruptcy? Yes No

Have you ever been arrested or convicted of a crime other than a routine traffic violation? Yes No

If yes, date and description _____

MORE ABOUT YOU

Type of work performed:

List types: _____

CLOSING REMARKS

Please list any comments you may have. Also include any item not covered in this application that may help us evaluate you and your ability to perform for our company. Thank your for your time and interest!

TO BE READ AND SIGNED BY APPLICANT

It is agreed and understood that any misrepresentation given above shall be considered an act of dishonesty and deceit.

It is agreed and understood that any offer of employment is contingent on passing a pre-employment physical and drug screen and on going requirements need to be met for continued employment.

It is agreed and understood that the motor carrier or his agents may investigate the applicant's background to ascertain any and all information of concern to applicant's record, whether same is of record or not, and applicant releases employers persons named herein from all liability for damages on account of his furnishing such information.

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 Investigating Consumer Report, including information regarding my character, general reputation, personal characteristics, and mod of living.

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

It is agreed and understood that this application for qualification in no way obligates the motor carrier to employ or lease the undersigned applicant.

It is agreed and understood that if qualified, the driver may be on a probationary period during which time he may be disqualified without reserves.

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.

Date

Applicant's Signature