

APPLICATION FOR EMPLOYMENT

13821 60th Street NW Williston, ND 58801 Fax: (701) 540-0403

TODAY'S DATE: _				
Logistics, Inc. will be base opportunities or practice	sed on merit, qualifications, and abilits on the basis of race, color, religio	ties. Maverick Logistics, Inc n, sex, national origin, age,	s, employment decisions at Maverick does not discriminate in employment disability, or any other characteristic n, any required testing, or during the	
Name:		Ph #	Message #	
Address:		E-Mail Address:		
City/State/Zip:		ı		
Employment Desire	ed:	1 5		
Position:		Date Available:		
Salary Desired:		Are you currently employed?		
Employment Type Desired: Full-Time		Part-Time Temporary		
Do you possess a va	lid ND State Driver's license an	d auto insurance?		
Do you possess a cu	rrent First Aid/CPR card?			
Have you ever been If yes, provide detail	convicted of a crime other than ls:	a minor traffic violation	? Yes No	
	to work in the U.S. (verification w	ill be required upon employm	ent)? Yes No	
Education:				
Insti		ute	Subject(s)	
High School Graduated Yes No				
College				
Graduated Yes No Some College,				
Trade/Business or				
Technical				

Subject of spec	cial study or research	1:			
Obtain Degree	? Yes +No	If Ye	s, Date:		
Employment H	listory:				
	Employer #2	1	Employer #2	En	nployer #3
Dates:					
Company:					
Address:					
Supervisor:					
Phone:					
Position:					
Salary:					
Reason for Leaving:					
Physical Inforn	nation:				
	perform the essent	ial functions of the No	ne position you ar	e applying for with	or without
References:		#1		#2	
Name:				·	
Address:					
Phone:					
Company:					
Years Known:					
In case of emer	gency, notify: (Red	mired unon hiring)		
Name:		ddress:)	Ph. #:	

Special Skills: (Indicate speed, knowledge (yes/no), or N/A if not knowledgeable)

Special Skills. (Illule	ate speed, knowledge (<i>yes/110)</i> , or 14/11 in not	Kilo Wicagoadio)	
Excel	Word Perfect	Word	Power Point	Access
Estimating Software	Accounting Software	E-mail/Internet	Switchboard	Typing Speed
10-Key Calculator	Copier	Fax	MS Project	Other

Construction Equipment (Please li	ist your experience and tools used)
Special Licenses or Certifications	(Please list)
Type:	
Type:	
Notary Public for State of ND?	Yes No
Other:	
Please include any other informat	ion about your qualifications that you would like us to know.

EMPLOYMENT APPLICATION ACKNOWLEDGEMENT

Drug Testing:

I understand that should Maverick Logistics, Inc. employ me, I may be subjected to pre-employment drug & alcohol testing. A positive drug test or refusal to take a drug and alcohol test is cause for denied employment. I also understand that should I be employed by Maverick Logistics, Inc., I may be subjected to alcohol & drug testing during my employment.

Employment-At-Will:

I understand and agree that should I be employed by Maverick Logistics, Inc., my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice. I understand that the right to terminate this employment relationship is at will, at any time, with or without cause, and is retained by Maverick Logistics, Inc. and myself. I understand that no one person in this company is authorized to make promises on behalf of Maverick Logistics, Inc.

Providing False Information:

I attest to the accuracy and truthfulness of the information provided in this application process, and any misstatement of material facts will be grounds for my disqualification from further consideration in the selection process, or, if hired, grounds for discharge.

Employment Terminations:

I understand that if hired, my employment termination may be immediate when, in the judgment of management, any offence, which I might commit, is of such magnitude that keeping me on the job would be detrimental to Maverick Logistics, Inc.

Reference Checks/Consent to Release Information:

the date stated below and shall re-	main in effect until further written notice by	me and will not expire otherwise.	
I do hereby release all parties from	m any damages resulting from the disclosure	of such information.	
Date	Applicant Name (Print)	Applicant Signature	

I understand that Maverick Logistics, Inc. may thoroughly investigate my work and person, including criminal history, and verify all data given on this application, on related papers, and during interviews. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I release Maverick Logistics, Inc. from any and all liability for damage in the request and receipt of this information. Further, this authorization is subject to no limitation. This consent is effective immediately upon