

# EMPLOYMENT APPLICATION



RUU Transportation LLC  
Bridgewater, MA | 617-406-9491

## PERSONAL INFORMATION

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Are you authorized to work in the U.S.? Yes  No

Are you 18 years or older? Yes  No

## DRIVING RECORDS HISTORY

Position Applied For: \_\_\_\_\_

How long have you had your license? \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Available Full Time? Yes  No  Part Time? Yes  No

## EDUCATION

School Name | City/State | Course of Study | Graduated | Years Attended

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## PROFESSIONAL REFERENCES

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

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## EMPLOYMENT HISTORY

Employer 1: \_\_\_\_\_ Phone: \_\_\_\_\_ May we contact? Yes [ ] No [ ]

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer 2: \_\_\_\_\_ Phone: \_\_\_\_\_ May we contact? Yes [ ] No [ ]

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer 3: \_\_\_\_\_ Phone: \_\_\_\_\_ May we contact? Yes [ ] No [ ]

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**PRE-EMPLOYMENT PHYSICAL & DRUG SCREENING NOTICE**

If an offer of employment is made, it may be contingent upon the results of a medical exam and/or drug screening as required for the position. Refusal or failure to meet requirements may disqualify the applicant from employment consideration.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_