



Transportation Division
PO Box 1967 Mount Airy, NC 27030

Phone: 336-789-0545
Fax: 336-783-9332

Office/Shop Application for Employment

Notice: This application must be prepared in the handwriting of the person who is applying for a job. Answer all questions – print clearly.

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or non-job related disability.

Date of Application: _____ Position(s) Applied For: _____

Name: _____ Social Security Number: _____
First Middle Last

Date of Birth: _____ Can you provide proof of age and do you have legal right to work in the United States? _____

Contact Information Home Phone: _____ Cell Phone: _____

List addresses of residency for the past 3 years – begin with your current address and mailing address if different:

Current Address _____ How Long? _____
Street City State & Zip Code

Mailing Address _____
Street City State & Zip Code

Previous Address _____ How Long? _____
Street City State & Zip Code

Have you worked for W.L.A., Inc. before? _____ Dates: From _____ to _____ Pay: _____

Position: _____ Reason for leaving: _____

Supervisor: _____

Who referred you? _____ Pay rate expected: _____

In case of emergency, notify: _____ Relationship: _____

Current Address _____
Street City State & Zip Code

Home Phone: _____ Cell Phone: _____

PAST EMPLOYMENT HISTORY AND WORK RELATED SKILLS

List all full and part-time employment; including military service, self-employment, and periods of unemployment during the preceding ten (10) years. Begin with the most recent employer. Use an additional sheet if necessary.

Are you currently employed? _____ If not, how long since leaving last employment? _____

Current or Most Recent Employer		From (mm/dd/yyyy)	To (mm/dd/yyyy)
Address		Position Held	
City	ST	Zip Code	Salary/Wage
Contact Person		Phone Number	
Type of Business	Reason for Leaving		
Duties/Responsibilities			

2 nd Prior Employer		From (mm/dd/yyyy)	To (mm/dd/yyyy)
Address		Position Held	
City	ST	Zip Code	Salary/Wage
Contact Person		Phone Number	
Type of Business	Reason for Leaving		
Duties/Responsibilities			

3 rd Prior Employer		From (mm/dd/yyyy)	To (mm/dd/yyyy)
Address		Position Held	
City	ST	Zip Code	Salary/Wage
Contact Person		Phone Number	
Type of Business	Reason for Leaving		
Duties/Responsibilities			

4 th Prior Employer		From (mm/dd/yyyy)	To (mm/dd/yyyy)
Address		Position Held	
City	ST	Zip Code	Salary/Wage
Contact Person		Phone Number	
Type of Business	Reason for Leaving		
Duties/Responsibilities			

5 th Prior Employer		From (mm/dd/yyyy)	To (mm/dd/yyyy)
Address		Position Held	
City	ST	Zip Code	Salary/Wage
Contact Person		Phone Number	
Type of Business	Reason for Leaving		
Duties/Responsibilities			



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PAST EMPLOYMENT VERIFICATION REQUEST

I, the undersigned, have applied for a position with W.L.A., Inc. I authorize you to release the information requested, including assessments of my past performance, safety related matters, and information concerning the results of any controlled substance and/or alcohol testing, or any refusal to test while employed by you. You are released from any and all liability, which may result from the release of this information. All information released to W.L.A., Inc. is held in strict confidence.

Applicant's Full Signature: _____ Date: _____

APPLICANT – DO NOT WRITE BELOW THIS LINE

Applicant's Name: _____ Social Security#: _____

Previous Employer: _____ Phone: _____ Fax: _____

Address: _____
 Street City ST Zip Code

The applicant named above was employed by us: Yes No Position Held: _____

Dates of Employment	
From (mm/dd/yyyy)	To (mm/dd/yyyy)

Job Performance: Satisfactory Unsatisfactory

Termination: Voluntary Forced

Reason for Leaving: _____

Eligible for Rehire: Yes No Upon Review

If no, why? _____

PAST DRUG AND ALCOHOL TEST RESULTS AND ANY REFUSALS TO BE TESTED

The above named individual has advised us that he/she worked for your company or that he/she applied to your company to work during the previous three (3) years. If this individual was participating in a drug/alcohol testing program, please answer below.

Has this person tested positive for a controlled substance in the last three years? Y N

Has this person had an alcohol test with a breath alcohol concentration of 0.04 or greater in the last three years? Y N

Has this person refused a required test for drugs in the last three years? Y N

ADDITIONAL COMMENTS *This information is held in strict confidence.*

 Signature

 Date

 Printed Name

 Job Title



EDUCATIONAL INFORMATION

Name of High School: _____ City, ST: _____

Did you graduate: Yes No Type of degree: _____

Name of College: _____ City, ST: _____

Did you graduate: Yes No Type of degree: _____

Other education: _____ City, ST: _____

Did you graduate: Yes No Type of degree: _____

OTHER INFORMATION

Driver License Number _____ ST _____ Expires _____

Have you served in the U.S. Armed Forces? Yes No Branch _____ Rank _____

Are you related by blood or marriage to any person(s) now employed by W.L.A., Inc.? Y N

If "yes", name: _____ Relationship: _____

If you are under 18, can you provide proof of your eligibility to work? Y N

Can you travel if the position requires it? Y N

Do you have a pending charge or conviction for any misdemeanor or felony offense? Y N

List any other information that may help you in your work for W.L.A., Inc. (courses, training, special equipment, etc...)

PROFESSIONAL REFERENCES – List two

The persons listed below, neither of whom are related to me in any many, can verify the information in this application, as well as personal character references. I hereby authorize you (by my signature on this application) to contact the persons listed below to request that information, and I hereby authorize the persons listed below to release that information to W.L.A., Inc.

Name _____ Telephone Number _____

Address _____

City _____ State _____ Zip Code _____

Name _____ Telephone Number _____

Address _____

City _____ State _____ Zip Code _____

CONSUMER DISCLOSURE AND AUTHORIZATION FORM
Authorization of Background Investigation for Employment Purposes
To Be Read and Signed by Applicant

Disclosures

W.L.A., Inc. (the "Company") may request from a consumer reporting agency and for employment-related purposes, a "consumer report(s)" (commonly known as "background reports") containing background information about you in connection with your employment or application for employment (including independent contractor or volunteer assignments, as applicable).

HireRight, Inc. ("HireRight") will prepare or assemble the background reports for the Company. HireRight is located and can be contacted at 3349 Michelson Drive, Suite 150, Irvine, CA 92612, (800) 400-2761, www.hireright.com.

The background report(s) may contain information concerning your character, general reputation, personal characteristics, mode of living, or credit standing. The types of background information that may be obtained include, but are not limited to: criminal history; litigation history; motor vehicle record and accident history; social security number verification; address and alias history; credit history; verification of your education, employment and earnings history; professional licensing, credential and certification checks; drug/alcohol testing results and history; military service; and other information.

Investigative Consumer Report: W.L.A., Inc. (the "Company") may request an investigative consumer report about you from HireRight, Inc. ("HireRight"), a consumer reporting agency, in connection with your employment or application for employment (including independent contractor or volunteer assignments, as applicable). An "investigative consumer report" is a background report that includes information from personal interviews, the most common form of which is checking personal or professional references through personal interviews with sources such as your former employers and associates, and other information sources. The investigative consumer report may contain information concerning your character, general reputation, personal characteristics, mode of living, or credit standing. You may request more information about the nature and scope of an investigative consumer report, if any, by contacting the Company.

Ongoing Authorization: If the Company hires you or contracts for your services, the Company may obtain additional consumer reports and investigative consumer reports about you without asking for your authorization again, throughout your employment or your contract period, as allowed by law.

Summary of Rights under the Fair Credit Reporting Act: A summary of your rights under the Fair Credit Reporting Act is being provided to you separately.

HireRight Privacy Policy: Information about HireRight's privacy practices is available at www.hireright.com/Privacy-Policy.aspx.

Acknowledgments & Authorization

I acknowledge that I have received and carefully read and understand the separate "Disclosure and Authorization Regarding Background Investigation for Employment Purposes"; and the separate "Summary of Rights under the Fair Credit Reporting Act" that have been provided to me by the Company.

By my signature below, I authorize the preparation of background reports about me, including background reports that are "investigative consumer reports" by HireRight, and to the furnishing of such background reports to the Company and its designated representatives and agents, for the purpose of assisting the Company in making a determination as to my eligibility for employment (including independent contractor or volunteer assignments, as applicable), promotion, retention or for other lawful employment purposes. I understand that if the Company hires me or contracts for my services, my consent will apply, and the Company may, as allowed by law, obtain from HireRight (or from a consumer reporting agency other than HireRight) additional background reports pertaining to me, without asking for my authorization again, throughout my employment or contract period.

I understand that if the Company obtains a credit report about me, then it will only do so where such information is substantially related to the duties and responsibilities of the position in which I am engaged or for which I am being evaluated.

I understand that information contained in my employment (or contractor or volunteer) application, or otherwise disclosed by me before or during my employment (or contract or volunteer assignment), if any, may be used for the purpose of obtaining and evaluating background reports on me. I also understand that nothing herein shall be construed as an offer of employment or contract for services.

I understand that the information included in the background reports may be obtained from private and public record sources, including without limitation and as appropriate: government agencies and courthouses; educational institutions; and employers. Accordingly, I hereby authorize all of the following, to disclose information about me to the consumer reporting agency and its agents: law enforcement and all other federal, state and local government agencies and courts; educational institutions (public or private); testing agencies; information service bureaus; credit bureaus and other consumer reporting agencies; other public and private record/data repositories; motor vehicle records agencies; my employers; the military; and all other individuals and sources with any information about or concerning me. The information that can be disclosed to the consumer reporting agency and its agents includes, but is not limited to, information concerning my: employment and earnings history; education, credit, motor vehicle and accident history; drug/alcohol testing results and history; criminal history; litigation history; military service; professional licenses, credentials and certifications; social security number verification; address and alias history; and other information.

By my signature below, I also promise that the personal information I provide with this form or otherwise in connection with my background investigation is true, accurate and complete, and I understand that dishonesty or material omission may disqualify me from consideration for employment. I agree that a copy of this document in faxed, photocopied or electronic (including electronically signed) form will be valid like the signed original. I further acknowledge that I have received additional state law notices that I have reviewed and read.

Applicant's Last Name _____ First _____ Middle _____

Applicant's Signature _____ Date _____

TO BE READ AND SIGNED BY THE APPLICANT

Statement of Probation

Introduction: The probation period is intended to give new employees the opportunity to demonstrate their ability to achieve a satisfactory level of performance and to determine whether the new position meets their expectations. The company uses this period to evaluate employees' capability, work habits, and overall performance.

General Policy: All new employees will be hired on a probation basis after their date of joining for six months. Any significant absence will automatically extend the probation period by the length of the absence. If the company determines that the designated probation period does not allow sufficient time to thoroughly evaluate the employee's performance, the probation period may be extended for a specified period. Upon satisfactory completion of the probation period, employees enter the "regular" employment classification.

Probation Performance: Prior to the completion of the six month probationary period, new employees will undergo performance appraisals to: provide feedback on performance, guidance on future direction, and to set selected specific objectives for the next performance appraisal period.

Drug and Alcohol Testing

W.L.A., Inc. is committed to have and maintain a workplace free of alcohol and controlled substances. Therefore, the offer of an assignment or an opportunity to continue assignment through W.L.A., Inc. depends upon the passing of a drug and/or alcohol test.

Acknowledgment of Application

I understand that my application will remain active for a period of ninety (90) days. If I have not been considered for a position with W.L.A., Inc. during that ninety (90) days, I understand that I must submit a new Employment Application.

By my signature hereon, I certify that I completed this application and that all entries on it and information in it are true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize persons, my current employer (if applicable) and previous employers and organizations named in this application, and accompanying resume, if any) to provide relevant information that may be required by W.L.A., Inc. to arrive at an employment decision. I understand and authorize that as part of the employment process, an investigation into my current and previous employment, financial, medial history, and other related matters as may be necessary in arriving at an employment decision. (Medical history investigations will be made only in accordance with current regulations.)

In consideration of W.L.A., Inc.'s review of this application, I release W.L.A., Inc. and all providers of information from any liability as a result of furnishing and receiving information. I also understand any employment manual or policies that may be distributed to me during the course of employment shall not be construed as a contract. I also understand that in the event of employment with W.L.A., Inc., that false or misleading information given in my application or interview(s) may result in immediate discharge at any time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with W.L.A., Inc. is an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

Date

Full Signature

Name (Please Print)

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment - or to take another adverse action against you - must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.
- In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identify theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your Federal rights contact:

TYPE OF BUSINESS:	CONTACT:
a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates. b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552 b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357
To the extent not included in item 1 above: a. National banks, federal savings associations and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center PO Box 1200 Minneapolis, MN 55480 d. FDIC Consumer Response Center 1100 Walnut St., Box #11 Kansas City, MO 64106 e. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314
Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
Creditors Subject to Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
Creditors Subject to Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area Supervisor
Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8 th Floor Washington, DC 20416
Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 (877) 382-4357