



300 E. Naghten St.
Columbus, Ohio 43215

Application for Employment Diesel Mechanic

Please submit completed application to service@fleetmaster.us or call us at 614-224-7201

Position(s) applied for _____ Date of Application ____/____/____

Referral Source: ☐ Advertisement ☐ Employee ☐ Relative ☐ Walk-in ☐ Other

Name _____
LAST FIRST MIDDLE

Address _____
STREET CITY STATE ZIP CODE

Phone Number _____ Social Security Number _____

E-mail _____ Best time to be contacted _____

Have you submitted an application here before? ☐ Yes ☐ No If yes, Date _____

Have you ever been employed here before? ☐ Yes ☐ No If yes, Dates _____
FROM TO

Are you legally eligible for employment in this country? ☐ Yes ☐ No

Date available for work _____

Type of employment desired: ☐ Full-Time ☐ Part-Time ☐ Temporary ☐ Seasonal

Will you relocate if job requires it? ☐ Yes ☐ No

Will you travel if job requires it? ☐ Yes ☐ No

Will you work overtime if required? ☐ Yes ☐ No If no, please explain _____

Have you ever been bonded? ☐ Yes ☐ No

Have you been convicted of a crime in the last seven (7) years? ☐ Yes ☐ No If yes, please explain _____

CONVICTION WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT. EACH INSTANCE AND EXPLANATION WILL BE CONSIDERED IN RELATIONSHIP TO THE POSITION FOR WHICH YOU ARE APPLYING.

Drivers license number REQUIRED if driving a car or operating other company equipment is an essential job function.

License # _____ State _____ Exp. Date _____

Class _____ Endorsements _____

EMPLOYMENT HISTORY

Provide the following information for you past and current employers, starting with the most recent. Explain any gaps in employment in comments section on the following page.

Employer _____ Telephone _____	Summarize Job Duties & Responsibilities
Address _____	_____
Job Title _____	_____
Immediate Supervisor & Title _____	_____
Dates Employed From ____/____/____ To ____/____/____	_____
Reason for Leaving? _____	_____
Hourly Rate/Salary Starting _____ Per _____ Ending _____ Per _____	_____
May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	_____

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Hourly Rate/Salary Starting _____ Per _____ Ending _____ Per _____	_____
May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	_____

COMMENTS Including explanation of any gaps in employment _____

SKILLS AND QUALIFICATIONS - Summarize any special training, skills, license and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

EDUCATIONAL BACKGROUND IF JOB RELATED
List last three school's attended, starting with the most recent.

<u>School</u>	<u>Yrs. Completed</u>	<u>Degree/Diploma</u>	<u>GPA/Class Rank</u>	<u>Major</u>	<u>Minor</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

REFERENCES

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you

<u>Name</u>	<u>Phone Number</u>	<u>Years Known</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

ADDITIONAL INFORMATION

List special accomplishments, publications, awards, etc.

Exclude information which would reveal sex, race, religion, national origin, age, color, disability or other protected status.

List any additional information you would like us to consider.

Please indicate below why you would like to work for Fleetmaster Leasing Corp.

DIESEL MECHANIC EXPERIENCE QUESTIONNAIRE

Check your experience on the following vehicles:

	NONE	LIMITED	EXTENSIVE
FREIGHTLINER	_____	_____	_____
VOLVO	_____	_____	_____
ISUZU	_____	_____	_____
KENWORTH	_____	_____	_____
PETERBILT	_____	_____	_____
MACK	_____	_____	_____
FORD	_____	_____	_____
DESCRIBE _____			

Check your experience on the following engines:

	NONE	LIMITED	EXTENSIVE
DETROIT	_____	_____	_____
VOLVO	_____	_____	_____
CUMMINS	_____	_____	_____
ISUZU	_____	_____	_____
OTHER	_____	_____	_____
DESCRIBE _____			

Do you have experience on transmissions? If so, describe.

DESCRIBE _____

Check your experience on the following rear end makes:

	NONE	LIMITED	EXTENSIVE
SPICER	_____	_____	_____
EATON	_____	_____	_____
MACK	_____	_____	_____
ROCKWELL	_____	_____	_____
OTHER	_____	_____	_____

[illegible]

Check your experience on the following subsystems:

	NONE	LIMITED	EXTENSIVE
FRONT AXLE	_____	_____	_____
FRONT SUSPENSION	_____	_____	_____
REAR SUSPENSION	_____	_____	_____
DESCRIBE	_____	_____	

[illegible]

Check your experience in the following areas:

	NONE	LIMITED	EXTENSIVE
CLUTCH ADJUSTMENT	_____	_____	_____
CLUTCH REPLACEMENT	_____	_____	_____
TRANSMISSION REMOVAL	_____	_____	_____
REAR END REMOVAL	_____	_____	_____
DESCRIBE	_____		

Check your experience in the following areas:

	NONE	LIMITED	EXTENSIVE
WHEEL SEAL REPLACEMENT	_____	_____	_____
BRAKE OVERHAUL	_____	_____	_____
AIR SYSTEM REPAIR	_____	_____	_____
AIR COMPRESSOR REPLACEMENT	_____	_____	_____
DESCRIBE	_____		

Check your experience on electrical repair:

	NONE	LIMITED	EXTENSIVE
BATTERY ANALYSIS	_____	_____	_____
ALTERNATOR ANALYSIS	_____	_____	_____
ELECTRICAL DIAGNOSIS	_____	_____	_____
WIRING HARNESS REPLACEMENT	_____	_____	_____
DESCRIBE	_____		

Check your experience in the following areas:

	NONE	LIMITED	EXTENSIVE
ENGINE TUNE-UP	_____	_____	_____
VALVE ADJUSTMENT	_____	_____	_____
VEHICLE SERVICING	_____	_____	_____
PROBLEM DIAGNOSIS	_____	_____	_____
DESCRIBE _____			

Check your experience in the following areas:

	NONE	LIMITED	EXTENSIVE
ELECTRIC WELDING	_____	_____	_____
ACETYLENE WELDING	_____	_____	_____
DESCRIBE _____			

Check your experience in the following area:

	NONE	LIMITED	EXTENSIVE
AIR CONDITIONING SERVICE	_____	_____	_____
DESCRIBE _____			

Please describe any other areas of experience you possess: _____

I UNDERSTAND THAT IF I AM EMPLOYED, ANY MISREPRESENTATION OR MATERIAL OMISSION MADE BY ME ON THIS APPLICATION WILL BE SUFFICIENT CAUSE FOR CANCELLATION OF THIS APPLICATION OR IMMEDIATE DISCHARGE FROM THE EMPLOYER'S SERVICE, WHENEVER IT IS DISCOVERED.

I GIVE THE EMPLOYER THE RIGHT TO CONTACT AND OBTAIN INFORMATION FROM ALL REFERENCES, EMPLOYERS, EDUCATIONAL INSTITUTIONS AND TO OTHERWISE VERIFY THE ACCURACY OF THE INFORMATION CONTAINED IN THIS APPLICATION. I HEREBY RELEASE FROM LIABILITY THE EMPLOYER AND ITS REPRESENTATIVES FOR SEEKING, GATHERING AND USING SUCH INFORMATION AND ALL OTHER PERSONS, CORPORATIONS OR ORGANIZATIONS FOR FURNISHING SUCH INFORMATION.

The employer does not unlawfully discriminate in employment and no questions on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization. I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____ Date _____