MAINTENANCE ON THE MOVE APPLICATION FOR EMPLOYMENT

Personal Data:

Full Name: ____________________________ Date: _______________

Address: ____________________________ Date of Birth: ____________

Phone Number: (____) - ____________ Social Security Number: ____________________________

Have you been convicted of a crime within the last seven (7) years? If yes, please explain:

__________________________________________________________________________________

Have you ever been discharged for cause by a previous employer? If yes, please explain:

__________________________________________________________________________________

Do you have any driving violations on your record that might restrict you from driving one of our trucks under our insurance? (DUI, Speeding Tickets, Wreckless Driving....) Please fill out the MVR form on the back of this application so we can check your driving record.

__________________________________________________________________________________

Do you have any experience driving a 16 ft box truck? __________________________________________

Availability:

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<th>Tue</th>
<th>Wed</th>
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<td>Earliest Time</td>
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<td>Latest Time</td>
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Maximum hours you can work per week: ____________

Number of hours you prefer to work each week: ____________

Position Desired: __________________ Salary Desired: __________________

Date available for employment: __________________

Education:

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 5 6 7 8 +

If you went to college did you graduate? __________________

If you graduated college, please describe your education and your school name:

__________________________________________________________________________________
Employment Record:

List your current or most recent employer first and indicate a continuous record of employment.

Company Name/
Address: 

Dates employed: From: __________ To: __________

Supervisor’s Name: __________

Position and Pay Rate: __________

Duties: 

Reason for Leaving: 

Company Name/
Address: 

Dates employed: From: __________ To: __________

Supervisor’s Name: __________

Position and Pay Rate: __________

Duties: 

Reason for Leaving: 

Company Name/
Address: 

Dates employed: From: __________ To: __________

Supervisor’s Name: __________

Position and Pay Rate: __________

Duties: 

Reason for Leaving: 
Why are you applying for this position?


Why should Maintenance on the Move hire you?


Please list any past experiences or responsibilities that would make you valuable to Maintenance on the Move:


Skills Test

1. What are three critical necessities that any gas engine needs to run?

2. If a single cylinder small engine on a rider mower has good compression and it has good fuel flow, what could the reason be for not starting? (Assuming it does turn over)

3. If a customer states that there lawn mower runs great for a half hour or so then just dies and will not start until it cools off or sits for a couple minutes, what do you think could cause this?

4. What is your procedure to test for an electrical draw on a vehicle or piece of small equipment using a multi-meter?

5. Describe some of your lawn mower or snow blower repair experiences?

6. Describe what you feel should all be entailed in a full tune up service on a lawn mower or snow blower?
Motor Vehicle Record Release and Authorization Form (MVR Form)

Employer:  Maintenance on the Move

Insurance Company: West Bend Mutual Insurance

This authorization shall continue in effect until revoked by the undersigned in a future written request.

Full Name: __________________________________________

Date of Birth: __________________________

Driver’s License #: __________________________

State Licensed: _______

***Copy of License if possible***

Signature: __________________________________________

________________________________________________________________________________________

PLEASE READ CAREFULLY BEFORE SIGNING

This application will be retained on file for one year.

I understand that nothing in this document establishes expressed or implied employment. All employment is at-will and may be terminated by either party with or without cause.

This certifies that this application was completed by me and that all entries on it are true and complete to the best of my knowledge. I understand that any false information, misrepresentation, or concealment of fact is sufficient grounds for termination or refusal of employment by Maintenance on the Move.

I understand and agree that all information furnished in the application may be verified Maintenance on the Move. I also understand that any employment is subject to a satisfactory check of references. I hereby authorize all individuals and organizations named or referred to in this application and any law enforcement organization to give this company all information relative to employment, work habits, and character and hereby release such individuals, organizations and this company from any liability for any claim or damage which may result.

Signature of Applicant: __________________________________________ Date: ______________________

Thank you for taking the time to fill out this application and thank you for your interest in Maintenance on the Move.