MAINTENANCE ON THE MOVE APPLICATION FOR EMPLOYMENT

Personal Data:

Full Name:						Date:		
Address:				_		Date of Birth:		
Phone Number	:() -		Social So	 ecurity Number	ī			
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?								
<u>Availability</u>	<u>(</u> :							
Day	Sun	Mon	Tue	Wed	Thurs	Fri	Sat	
Earliest Time								
Latest Time								
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:	and the contract of the contra	
Dates employed: From:	To:	
Supervisor's Name:		
Position and Pay Rate:		
Duties:	±11.00 (10.00 (1	
Reason for Leaving:		
Company Name/		
Address:		
Dates employed: From:	To:	- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-
Supervisor's Name:		
Position and Pay Rate:		
Duties:		
Reason for Leaving:		
Company Name/		
Dates employed: From:	To:	
Supervisor's Name:		
Position and Pay Rate:		
Duties:		
Reason for Leaving		

Why are you applying for this position?						
you?	uld Maintenance on the Move hire					
Please lis	st any past experiences or responsibilities that would make you valuable to <i>Maintenance on the</i>					
Skills 7	<u>Test</u>					
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 ur	dersigned 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 in be terminated by either party with or without cause.	mplied employment. All employment is at-will and may			
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 <i>Maintenance on the Move</i> .				
I understand and agree that all information furnished in the application understand that any employment is subject to a satisfactory check of organizations named or referred to in this application and any law entinformation relative to employment, work habits, and character and homeometry from any liability for any claim or damage which may result.	references. I hereby authorize all individuals and orcement organization to give this company all nereby release such individuals, organizations and this			
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.