



I n d e p e n d e n t D i s p a t c h I n c .

Employment Application

Today's Date: _____ Position Applied for: _____

How did you hear about our company? _____

Name: _____ Phone #: _____

Are you over the age of 18? _____ If no, can you provide proof of age? _____

Are you presently employed? _____ If no, how long have you been unemployed? _____

Employment History:

Name of Company: _____

Address: _____

Position Held: _____

Dates of Employment: From: _____ To: _____ Phone #: _____

Supervisor's Name: _____

Reason for Leaving: _____

Name of Company: _____

Address: _____

Position Held: _____

Dates of Employment: From: _____ To: _____ Phone #: _____

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Name of Company: _____

Address: _____

Position Held: _____

Dates of Employment: From: _____ To: _____ Phone #: _____

Supervisor's Name: _____

Reason for Leaving: _____

Education:

What is the highest grade you completed while in school: _____

What is the name of the most recent school you attended: _____

Where is it located (city and state): _____

Qualifications:

Briefly describe your qualifications and how they meet the position requirements: _____

I certify that this application was completed by me and that all information in it is true and correct to the best of my knowledge.

I authorize Independent Dispatch, Inc. to make inquiries regarding my personal, education and employment history as well as other matters that are necessary to arrive at an employment decision.

I hereby release employers, schools and other persons from all liability to inquiries and the release of information pertaining to this application.

I realize that, in the event of employment with Independent Dispatch, Inc., false or misleading information given in this application may result in termination of my employment.

Applicant's Signature

Date

Please e-mail completed application to: msimmons@independentdispatch.com