EMPLOYMENT APPLICATION

Please complete the entire application.

Employer In	formation
over:	Trucking Daddy's Logistics LLC
•	2035 Sharon Ave
tate/ZIP:	Indianapolis, Indiana 46222
	317777974
olicants and en	acking Daddy's Logistics LLC to provide equal employment opportunities to apployees without regard to any legally protected status such as race, color, onal origin, age, disability or veteran status.
Applicant In	Formation
cant Full Name	:
Address:	
tate/ZIP:	
er of years at t	his address:
ne phone:	Evening phone:
Security Num	ber:
's License (Sta	ate/Number):
Emergency (Contact
should be conta	acted if you are involved in an emergency?
ct Name:	
onship to you:	
ess:	
tate/ZIP:	
ne phone:	Evening phone:
Job Position	Applied For:
Full or Part	Fime?
	Applicant Information, gender, nation Applicant Information Applicant Information Address: Itate/ZIP: Itate/ZIP: Itate phone: Itate/State contact Name: Itate/ZIP: Itate/ZIP: Itate/ZIP: Itate/ZIP: Itate/ZIP: Itate/ZIP: Itate/ZIP: Itate/ZIP: Itate/Discounties: Itate/ZIP: Itate/ZIP: Itate/Discounties: Itate/ZIP: Itate/Z

Salary Desired: \$ _____ per ____

5.

0.	Do you have any friends or relatives who work h						
7.	Have you applied to our company previously?	Yes	_ No				
8.	Are you at least 18 years old?	Yes	_ No				
9.	Are you willing to work any shift, including nights and weekends? Yes N If no, please state any limitations:						
10.	If applicable, are you available to work overtime? Yes No						
11.	If you are offered employment, when would you be available to begin work?						
12.	If hired, are you able to submit proof that you are legally eligible for employment in the United States? Yes No						
13.	Applicant's Skills						
exper	ny skills that may be useful for the job you are seek ience, and circle the number which corresponds to you sents poor ability, while five represents exceptional a	your ability for each pa	•				
			Ability				
S1 	kill	Years of Experience	12345				
14.	Applicant Employment History						
and m	our current or most recent employment first. Please Inilitary service) which you have held, beginning with in employment. If additional space is needed, continued to the contin	the most recent, and li	st and explain any				
_	oyer Name:						

Address:				
City/State/ZIP:				
Job Duties:				
Reason for Leaving:				
Dates of Employment				
Employer Name:				
Supervisor Name:				
Address:				
City/State/ZIP:				
Job Duties:				
Dates of Employment	(Month/Year):			
E 1 N				
Employer Name:				
Supervisor Name:				
Address:				
City/State/ZIP:				
Job Duties:				
	(A. K			
Dates of Employment	(Month/Year):			
15. Applicant's Ed	lucation and Training			
rr		,		
College/University Na	ame and Address			
Did you receive a deg	ree?Yes	No	If yes, degree(s) receive	ved:
High School/GED Na	me and Address			
ingn senoon old ita	and riddress			
Did you receive a deg	ree? Yes	No		
Other Training (gradua	ate, technical, vocation	onal):		
Please indicate any cur	rrent professional lice	enses or certifica	tions that you hold:	
ricase marcate any cur	frent professional nec	clises of certifica	tions that you hold.	
Awards, Honors, Spec	cial Achievements:			

16.

References

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Trucking Daddy's Logistics LLC to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Owner, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Trucking Daddy's Logistics LLC, except in a specific written contract of employment signed on behalf of the organization by its Owner, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE C AND AGREE TO ITS TERMS.	CERTIFICATION AND I UNDERSTAND
APPLICANT SIGNATURE	DATE