

Issued To:
D,M,N,O,V,Z

Company
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THE WIN GROUP
PROCEDURE
MANUAL

Job Application Form

E-275-A
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01/12/2016

We are an equal opportunity employer. Your Application and response to any question will be judged on its relevance to the position you are seeking. Revised

This form must be filled out completely by the applicant. Please print in ink. Incomplete applications will not be considered.

PERSONAL INFORMATION

DATE / /

Name (Last)	(First)	(Middle)	Social Security No.	
Home Address		City	State	Zip
Home Phone () ()	Cell Phone () ()	Email Address	Business Phone () ()	May we contact you at work? (circle one) Yes No
Position Applying For	Date Available / /	Are you interested in (circle all that apply) Full-time Part-time Temporary Summer		
If you are under 18 years of age, please state your date of birth. _____/_____/_____				
If you are applying for a position that includes driving duties, do you hold a valid driver's license? (circle one) Yes No <small>Revised</small>				
Do you hold a valid CDL (Commercial Driver's License)? <small>Revised</small> Yes No				

Can you perform the duties of the position for which you are applying with or without reasonable accommodation? (circle one) Yes No

Comment: _____

Are you willing to relocate? (circle one) Yes No

Are you willing to travel? (circle one) Yes No What percent? _____%

Are you willing to work weekends? (circle one) Yes No

Are you willing and able to work overtime if required? (circle one) Yes No

How were you referred to us? _____

EDUCATION

Type of School	Name and Location of School	Number of Years Attended	Degree or Diploma	Field of Study
High School	Name			
	Location			
College	Name			
	Location			
Graduate School	Name			
	Location			
Trade School	Name			
	Location			
Other	Name			

SPECIAL SKILLS

List certifications or licenses held, computer software with which you are familiar and equipment you are qualified to operate.

U.S MILITARY SERVICE

Branch of Service	Technical Specialization	Rank Attained
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EMPLOYMENT HISTORY

Have you previously worked at a Winsupply or Noland Company?

(Mark one) No Yes. Specify name of Company, dates and position _____

Other Employers

List employment below starting with your most recent position. Please indicate if you were employed under a different name. Do not omit any prior employers. You may request a duplicate of this page if necessary. Reference to other documents such as a resume is not acceptable. By submitting this Application, I consent to have the Company contact the people listed on this form for references and authorize those individuals to provide truthful information regarding my qualifications for employment and my previous work history. ^{Revised}

Employer	Dates Employed	
	From: mm/yyyy	To: mm/yyyy
Address	Telephone Number	
City State	()	
Job Title	Starting Salary	
Immediate Supervisor & Title	\$ Per	
Reason for Leaving	Final Salary	
	\$ Per	
Employer	Dates Employed	
	From: mm/yyyy	To: mm/yyyy
Address	Telephone Number	
City State	()	
Job Title	Starting Salary	
Immediate Supervisor & Title	\$ Per	
Reason for Leaving	Final Salary	
	\$ Per	
Employer	Dates Employed	
	From: mm/yyyy	To: mm/yyyy
Address	Telephone Number	
City State	()	
Job Title	Starting Salary	
Immediate Supervisor & Title	\$ Per	
Reason for Leaving	Final Salary	
	\$ Per	
Employer	Dates Employed	
	From: mm/yyyy	To: mm/yyyy
Address	Telephone Number	
City State	()	
Job Title	Starting Salary	
Immediate Supervisor & Title	\$ Per	
Reason for Leaving	Final Salary	
	\$ Per	

EMPLOYMENT HISTORY COMMENTS (Including Explanation of any Gaps in Employment)

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ADDITIONAL INFORMATION

You may list any other information you would like us to consider. That could include professional, trade, business or civic organizations and any offices held. You may list special accomplishments, publications, awards, etc. *(Exclude memberships that would reveal race, color religion, sex, sexual orientation, national origin, citizenship, age, mental or physical disabilities, or any other similarly protected class.)* Revised

LEGAL

Federal law requires us to verify new employees' eligibility to work in the United States. Within three business days of beginning your new position, you will be required to provide proof of your identity and employment eligibility. Revised

Were you ever discharged by any company? Yes No If yes, give name of company(ies)

Reason for discharge

Have you ever been convicted of a crime? Answer "No" if the records have been erased, expunged, shielded, sealed or annulled by a court. Skip this question if applicant resides in DC; Hawaii; Illinois; Massachusetts; Minnesota; New Jersey; and Rhode Island. (Circle one) Yes No Revised

The existence of a criminal record will not automatically disqualify you from the job for which you are applying. Convictions will be evaluated based on their substantial relationship to the particular job's requirements. If yes, please explain the offense and final disposition:

- Do not disclose any arrest records or non-felony traffic violations. Revised
- Do not disclose any convictions relating to juvenile offenses. Revised
- Do not disclose any records regarding a referral to, and participation in, any pretrial or post-trial diversion program in lieu of a criminal conviction. Revised
- In addition to the above, the following states have additional restrictions on what information may be requested: Revised
- California applicants are not required to disclose (a) misdemeanor convictions where probation has been completed or otherwise discharged and the case is dismissed; (b) marijuana-related convictions that occurred more than two years prior to application date. Revised
- Connecticut applicants are not required to disclose erased criminal or arrest records (which are treated under law as if they never occurred) or dismissed or nolle prosequi criminal charges, charges that resulted in acquittals and convictions that resulted in absolute pardons. Revised
- District of Columbia applicants are not required to disclose criminal convictions until after a conditional offer of employment is made. Revised
- Hawaii applicants are not required to disclose criminal conviction records until after a conditional offer of employment is made, and then such inquiries can only related to matters occurring within the previous 10 years (not including periods of incarceration). Revised
- Idaho applicants are not required to disclose misdemeanor convictions. Revised
- Illinois applicants are not required to disclose criminal convictions until after a conditional offer of employment is made. Revised
- Maine applicants are not required to disclose convictions for certain Class E crimes committed when they were young adults. Revised
- Massachusetts applicants are not required to disclose criminal convictions until after a conditional offer of employment is made and required disclosures provided to the applicant. Revised
- Minnesota applicants are not required to disclose criminal convictions until after a conditional offer of employment is made. Revised
- New Jersey applicants are not required to disclose criminal convictions until after a conditional offer of employment is made. Revised
- New York applicants are not required to disclose criminal convictions resolved through youthful offender adjudication. Revised
- North Dakota applicants are not required to disclose criminal convictions that occurred more than three years prior to the application. Revised
- Pennsylvania applicants are not required to disclose criminal convictions that occurred more than three years prior to the application. Revised
- Rhode Island applicants are not required to disclose criminal convictions until after a conditional offer of employment is made. Revised
- South Dakota applicants are not required to disclose misdemeanor offenses that occurred at least 10 years prior to the application or for offenses no longer considered crimes or for any offenses committed by an applicant 75 years or older who has not committed a violation within the previous 10 years. Revised
- Utah applicants may be required to obtain copies of their own criminal record history and supply it as part of the application review process. Revised
- Washington applicants are not required to disclose criminal convictions unless they occurred less than 10 years prior to the application and such convictions are reasonably related to the job duties of the position being applied for. Revised

REFERENCES List three references (not relatives) that you have known for at least three years.

Name	Occupation	Address	Daytime Phone Number
			()
			()
			()

APPLICANT STATEMENT

I certify that all information that I have provided is complete, true and correct, to the best of my knowledge. I understand that if any information on this application is found to be false, it will be sufficient cause for my application to be rejected or for my dismissal, depending on when it is discovered.

I understand that, if I am hired, I am free to resign at any time, with or without cause and with or without prior notice. I also understand that the company reserves the same right to terminate my employment at any time, with or without cause and with or 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 my employment is an "at will" status and no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements to the contrary are valid. Revised

I authorize the investigation of any and all statements made in this application, my resume and interview. This includes, but is not limited to contacting and obtaining information from all references, employers, public agencies, licensing authorities and educational institutions. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organization for furnishing such information about me.

I understand that I may be requested to sign an Authorization and Release of Information Form for a Pre-Employment Background Check which may seek information as to my character, work habits and reasons for termination of past employment. Additionally, I understand that by signing such Authorization and Release of Information Form, information may be obtained from various federal, state and local agencies concerning my past activities relating to driving record, criminal record, previous employment, education and other aspects of my background which may be relevant to an employment decision. I understand that any offer of employment or continued employment is conditioned upon verification of reference information, my driving record, and successful completion of a background check and criminal records review. Revised

I also understand that as part of the application process, I will be required to submit to a drug test. Prior to the test I will be provided a copy of the policy and a copy of any positive test result. I further understand that any offer of employment or continued employment is conditioned on my receiving a negative test result.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all the terms of the Applicant Statement.

Signature of Applicant _____ Date _____

A- Purpose

- 1- All employees must have a current MVR on file.
- 2- This form is for Rehires and Temporary Employees.
- 3- MVRs for new hire driver candidates will be processed with the First Advantage background check process explained in E-340, "Pre-Employment Background Verification for New Hires or Re-Hires".

Reset Fields

EMPLOYEE INFORMATION

COMPANY NUMBER: _____ REHIRE: TEMPORARY DRIVER:

POSITION IN COMPANY: _____

EMPLOYEE'S NAME: _____
Last Name First Name Full Middle Name

EMPLOYEE'S ADDRESS: _____
Street or PO Box City State Zip Code

DATE OF BIRTH: _____
Month Day Year

LICENSE NUMBER: _____ ISSUING STATE: _____

EXPIRATION DATE: _____

SOCIAL SECURITY NUMBER: _____

AUTHORIZATION FOR RELEASE

I, _____, hereby authorize WGS Fleet Services to request a copy of my Motor Vehicle Driver's Record at any time.

SIGNATURE OF EMPLOYEE

DATE

PLEASE FAX THIS REQUEST TO

1-937-528-2141

WGS FLEET SERVICES
3131 S. DIXIE DR. STE 216
DAYTON OH 45439

IF YOU HAVE QUESTIONS REGARDING YOUR DRIVER CANDIDATE, PLEASE CONTACT YOUR BENEFITS ADMINISTRATOR AT **1-877-727-0010, OPTION 1**