

JP EXPRESS SERVICE, INC.
(Corporate Office) DOT # 511440
131 Hoffman Lane
Islandia, NY 11749
(800) 331-8065

APPLICATION

Location: _____ Hire Date: _____ Position: _____

Name: _____
(First) (Middle) (Last)

Current Address: _____
(Street) (City) (State/Zip Code) How Long?

Previous Address (1): _____
(Street) (City) (State/Zip Code) How Long?

Previous Address (2): _____
(Street) (City) (State/Zip Code) How Long?

Date of Birth: _____ Soc. Security #: _____

Phone: Home: _____ Cell Phone: _____

Email address: _____

Must list all addresses for the past 3 years

HISTORY WITH COMPANY WHICH YOU ARE APPLYING FOR

I have worked for JP Express before ___ Yes ___ No (If yes, please indicate hire and termination date)

I have applied for work with this company before ___ Yes ___ No

How did you hear about JP Express? _____

EMPLOYMENT RECORD

Note: Please list the last 3 employers

Employer: _____ Employed From: _____ To: _____

Address: _____

Phone: (____) _____ Supervisor _____

Position: _____ Reason for leaving: _____

Employer: _____ Employed From: _____ To: _____

Address: _____

Phone: (____) _____ Supervisor _____

Position: _____ Reason for leaving: _____

Employer: _____ Employed From: _____ To: _____

Address: _____

Phone: (____) _____ Supervisor _____

Position: _____ Reason for leaving: _____

Employer: _____ Employed From: _____ To: _____

Address: _____

Phone: (____) _____ Supervisor _____

Position: _____ Reason for leaving: _____

FAIR CREDIT REPORTING ACT DISCLOSURE STATEMENT

In accordance with the provisions of Section 604 (b) (2) (A) of the Fair Credit Reporting Act, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1966 (Title II, Subtitle D, Chapter 1, of Public Law 104-208), you are being informed that reports verifying your previous employment, previous drug and alcohol test results, and your driving record may be obtained on you for employment purposes. Your employer may obtain this information from Accufax, Equifax, Transunion, Experian or other vendors of information services.

Applicant's Signature

Date

Print Name

**ALCOHOL AND CONTROLLED SUBSTANCE
CONSENT AND RELEASE**

Have you ever refused to be tested for drugs & alcohol at any time in the last 2 years?	YES	NO
Have you ever tested positive for drugs or alcohol at any time in the last 2 years?	YES	NO
Have you ever tested positive on any pre-employment drug or alcohol test for a job which you applied for but did not obtain?	YES	NO

If you answered yes to any of the above questions, attach a statement of explanation and provide proof of return to duty process.

I understand that, as required by the Federal Motor Carrier Safety Regulations and company policy, all employees must submit to alcohol and controlled substance testing as a condition of employment. I also understand that any offer of employment will be contingent upon the results of an alcohol and controlled substance test.

Therefore, I agree to submit to the following alcohol and controlled substance tests in accordance and as defined by the Federal Motor Carrier Safety Regulation and this company's policies:

- Pre-Employment, to determine employment eligibility
- Random
- Reasonable Suspicion

I certify that I have read, understand, and agree to abide by the condition of this consent and release form.

Applicant's Signature

Date

Print Name

JP Express Witness