

# Mattingly Products Company

## Jobs Application

**Mattingly Products Company, 25 Solon Rd, North Anson, Maine, 207-635-2719**

### Applicant Information

FIRST NAME:		MIDDLE NAME:		LAST NAME	
PHONE:		EMAIL:			
DATE OF BIRTH:					
DATE OF APPLICATION:		POSITION APPLYING FOR:		DATE AVAILABLE FOR WORK:	

Do you have legal right to work in the United States? Yes  ( No  (

### Previous Three Years Residency

	STREET:	CITY:	STATE:	ZIP:	# OF YEARS AT ADDRESS:
CURRENT:					
MAILING:					
PREVIOUS:					
PREVIOUS:					
PREVIOUS:					

**LICENSE INFORMATION**

No person who operates a commercial motor vehicle shall at any time have more than one driver's license (49 CFR 383.21) I certify that I do not have more than one motor vehicle license, the information for which is listed below. Include all licenses held for the past 3 years.

State:	License #:	Type/Class:	Endorsements:	Expiration Date
Previously Held Licenses				

**DRIVING EXPERIENCE**

Class of Equipment	Type of Equipment (Van, Tank, Flat, etc.)	Date From	Date To	Approx # of Miles (Total)
Straight Truck				
Tractor & Semi-Trailer				
Tractor & 2 Trailers				
Tractor & Tanker				
Other				

**ACCIDENT RECORD FOR THE PAST 3 YEARS**

Dates (List Most Recent First)	Nature of Accident (Head-on, rear-end, upset, etc.)	# Fatalities	# Injuries	Chemical Spills (Y/N)

**TRAFFIC CONVICTIONS AND FORFEITURES FOR THE LAST 3 YEARS (OTHER THAN PARKING VIOLATIONS)**

Date Convicted (Month/Year)	Violation	State of Violation	Penalty (Forfeited bond, collateral and / or points)

**EMPLOYMENT HISTORY**

The Federal Motor Carrier Safety Regulations (49 CFR 391.21) requires that all applicants wishing to drive a commercial vehicle list all employment for the last three (3) years. In addition, if you have driven a commercial vehicle previously, you must provide employment history for an additional seven (7) years (for a total of ten (10) years). Any gaps in employment in excess of one (1) month must be explained.

**Current (Most Recent) Employer**

Name	<input type="text"/>	Phone	<input type="text"/>
Address	<input type="text"/>		
Position Held	<input type="text"/>	From Mo/Yr	<input type="text"/>
		To Mo/Yr	<input type="text"/>
Reason for Leaving	<input type="text"/>		Salary
			<input type="text"/>
Explain Any Gap in Employment (include month/year & reason	<input type="text"/>		

While employed here, were you subject to the Federal Motor Carrier Safety Regulations?

Yes     No

Was the job designated as a safety-sensitive function in any Department of Transportation-regulated mode subject to alcohol and controlled substances testing as required by 49 CFR.

Yes     No

**EMPLOYMENT HISTORY**

The Federal Motor Carrier Safety Regulations (49 CFR 391.21) requires that all applicants wishing to drive a commercial vehicle list all employment for the last three (3) years. In addition, if you have driven a commercial vehicle previously, you must provide employment history for an additional seven (7) years (for a total of ten (10) years). Any gaps in employment in excess of one (1) month must be explained.

**Second (Most Recent) Employer**

Name	<input type="text"/>	Phone	<input type="text"/>
Address	<input type="text"/>		
Position Held	<input type="text"/>	From Mo/Yr	<input type="text"/>
		To Mo/Yr	<input type="text"/>
Reason for Leaving	<input type="text"/>		Salary
			<input type="text"/>
Explain Any Gap in Employment (include month/year & reason	<input type="text"/>		

While employed here, were you subject to the Federal Motor Carrier Safety Regulations?

Yes  No

Was the job designated as a safety-sensitive function in any Department of Transportation-regulated mode subject to alcohol and controlled substances testing as required by 49 CFR, part 40?

Yes  No

### EMPLOYMENT HISTORY

The Federal Motor Carrier Safety Regulations (49 CFR 391.21) requires that all applicants wishing to drive a commercial vehicle list all employment for the last three (3) years. In addition, if you have driven a commercial vehicle previously, you must provide employment history for an additional seven (7) years (for a total of ten (10) years). Any gaps in employment in excess of one (1) month must be explained.

#### Third (Most Recent) Employer

Name	<input type="text"/>	Phone	<input type="text"/>
Address	<input type="text"/>		
Position Held	<input type="text"/>	From Mo/Yr	<input type="text"/>
		To Mo/Yr	<input type="text"/>
Reason for Leaving	<input type="text"/>		Salary
			<input type="text"/>
Explain Any Gap in Employment (include month/year & reason)	<input type="text"/>		

While employed here, were you subject to the Federal Motor Carrier Safety Regulations?

Yes  No

Was the job designated as a safety-sensitive function in any Department of Transportation-regulated mode subject to alcohol and controlled substances testing as required by 49 CFR, part 40?

Yes  No

### Education

School	Name & Location	Course of Study	Years Completed	Graduate		Details
				Y	N	
High School	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
College	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>

**Other Qualifications**

Please list any other qualifications that you have and which you believe should be considered.

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**TO BE READ AND SIGNED BY APPLICANT**

I authorize you to make investigations (including contacting current and prior employers) into my persona, employment, financial, medical history, and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, health care providers, and other person from all liability in responding to inquiries and releasing information in connection with my application.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of Mattingly Products Company.

I understand that the information I provide regarding my current and/or prior employers may be used, and those employer(s) will be contacted for the purpose of investigating my safety performance history as required by 49 CFR 391.23. I understand that I have the right to:

- Review the information provided by current/prior employers;
- Have errors in the information corrected by previous employers, and for those previous employers to resend the corrected information to the prospective employer; and
- have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information

This certifies that I completed the application, and that all entries on it and information in it are true and complete to the best of my knowledge. Note: A motor carrier may require an applicant to provide more information than that required by the Federal Motor Carrier Safety Regulations.

	<b>Date:</b>	<input type="text"/>
<b>Applicant Name (printed)</b>	<input type="text"/>	