

Coastal Transport Co., Inc.
1603 Ackerman Road
San Antonio, Texas 78219

NON-DRIVER APPLICATION FOR EMPLOYMENT

Name: _____ Date of Application: _____

 First Middle Last
Social Security Number: _____ Phone: () _____

*Current Address: _____

 Street City State Zip Code
*If at the above residence less than three years, list below all residences for the past three years Attach a separate sheet if necessary.

 Street City State Zip Code

Position Applying for: _____ Part Time _____ Full Time _____ Rate of pay expected? _____

Who referred you? _____ Have you worked for this company before? YES () NO ()

Dates: From _____ to _____ Where? _____ Position: _____
 month/year month/year

Have you ever worked for this company or any other company under another name? YES () NO ()

If so, under what name? _____ Name(s) of any relative(s) employed by this company: _____

Are you currently employed? YES () NO () If not, how long since leaving last employment? _____

EDUCATION

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College: 1 2 3 4

Last school attended: _____

 Name Address

GENERAL

Have you ever been convicted of a felony? YES () NO ()

If yes, please explain fully Conviction of a crime is not an automatic bar to employment All circumstances will be considered

EMPLOYMENT HISTORY

Start with last or current position, including military experience and work back ten years. Attach a separate sheet of paper if necessary.

Dates of Employment: From: _____ To: _____ Salary: _____

Current Employer: _____ Supervisor's Name: _____

Address: _____ Phone: () _____

Position Held: _____ Reason for leaving: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Employer: _____ Supervisor's Name: _____

Address: _____ Phone: () _____

Position Held: _____ Reason for leaving: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Employer: _____ Supervisor's Name: _____

Address: _____ Phone: () _____

Position Held: _____ Reason for leaving: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Employer: _____ Supervisor's Name: _____

Address: _____ Phone: () _____

Position Held: _____ Reason for leaving: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Employer: _____ Supervisor's Name: _____

Address: _____ Phone: () _____

Position Held: _____ Reason for leaving: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Employer: _____ Supervisor's Name: _____

Address: _____ Phone: () _____

Position Held: _____ Reason for leaving: _____

APPLICANT MUST READ & SIGN

I certify that I have read and understood all of this employment application. It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other persons named herein from all liability for any damages on account of furnishing such information. I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test. I also understand that I must be insurable and bondable.

It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include an Investigative Consumer Report, including information regarding my character, general reputation, personal characteristics, and mode of living.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I also understand that misrepresentation or omission of information or facts may result in my rejection or dismissal.

If hired, I agree to abide by all the rules and policies of the employer. I understand that my employment with Coastal Transport Co., Inc. is at-will and that Coastal Transport may terminate my employment at any time, for any reason or no reason, and with or without notice. I also understand that this application is not in any way to be construed as a contract of employment.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Applicant's Signature Date

Coastal Transport also endeavors to select and retain the best qualified individuals based upon job-related qualifications and regardless of race, color, creed, sex, religion, national origin, age, marital status, disability, sexual orientation or any other protected group under law.

Please answer the following questions as they relate to your work experience and the position you are applying for at Coastal Transport Co., Inc.

PROFESSIONAL/CLERICAL EXPERIENCE

Professional	(Yrs/Mo)
Advertising	
Communications	
Finance	
Human Resources	
Insurance	
Maintenance	
Marketing/Sales	
Oil and Gas	
Purchasing	
Safety	
Services	
Transportation	
Accounting	(Yrs/Mo)
Auditing	
Budget	
Cost	
Controller	
CPA	
Tax	
Bookkeeping	(Yrs/Mo)
Bank Reconciliation	
Billing	
Collections	
Credit	
Financial Statements	
Full Charge	
General Ledger	
Payroll	
Payables	
Receivables	
Data Entry	(Yrs/Mo)
Alpha	
Numeric	
10-Key (sight or touch)	

General Office	(Yrs/Mo)
Copy Clerk	
Claims Representative	
Customer Service	
File Clerk	
Mail Clerk	
PBX	
#Lines	# Extensions
Receptionist	
Typing wpm	
Secretarial	(Yrs/Mo)
Administrative Assistant	
Cert. Prof. Sec. (CPS)	
Executive Assistant	
Office Manager	
Shorthand	
Speedwriting	
Transcription	
Computer Skills	(Yrs/Mo)
Windows 3.11	
Windows 98 or 00	
MS Word	
MS Excel	
MS Access	
MS PowerPoint	
Word Perfect	
Lotus 1-2-3 DOS or Windows	
Other:	

MAINTENANCE EXPERIENCE & QUALIFICATIONS

List courses and training in maintenance work (enclose certificates): _____

Job Function/Shop Equipment					
Indicate training and Experience in the following:	Formal Training (Check)	Years of Experience	Area	Formal Training (Check)	Years of Experience
Drive Line Components			Body work		
Diesel Engine Tune-up & Rebuild			Electrical Repair		
Tank Trailer Repair			Frame & Wheel Alignment		
Tire Service			Brakes		
Trailer Repair			Cooling System		
Air Conditioning			Inspections		
Product Pump Repair			General Car Repair		
			Hose Repair		
Gear Box Rebuild Equipment			DOT Brake Inspection		
Electrical Diagnostic Equipment			Wheel & Tire Balancing Machine		
Brake Repair Equipment			Scully Test Equipment		
Frame & Axle Alignment			Hose Test Equipment		
Engine Rebuilding Equipment			Chassis Dynamometer		
Diesel Injection Equipment			Tank Trailer Test Equipment		
Electric Welder			Computerized Engine Diagnostic Equipment		
Oxyacetylene Welder			Noise Measuring Equipment		
Paint Spray Gun			Smoke Measuring Equipment		
Air Conditioning			Inspections		
			General Car Repair		

List of Certifications:

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

TERMINAL/DISPATCHING EXPERIENCE

Type of loads dispatched _____

On a daily basis what was your average:

_____ # of drivers _____ # of units _____ # of loads _____ # of customers

Computerized or Non-Computerized dispatching System and _____ Years/Months of experience.
(Circle one)

_____ Years/Months experience in reviewing /auditing driver logs.

_____ Years/Months experience DOT rules and regulations

_____ Years/Months experience with hauling liquid bulk.

_____ Years/Months experience in Operations/Transportation.

List any dispatch or customer service courses taken: _____

Request for Non-Driver Criminal Record

PLEASE PRINT

Terminal: _____

Applicant's Name: _____

Address: _____
PHYSICAL ADDRESS - PLEASE DO NOT LIST A POST OFFICE BOX NUMBER

City: _____ State: _____ Zip Code: _____

Social Security Number: _____ - _____ - _____

Date of Birth: _____
(Month) (Day) (Year)

Request for Non-Driver MVR

For Mechanics and any other personnel authorized to drive Coastal Transport equipment 26,001 lbs. or more, provide the information requested below.

Driver's License Number _____ State: _____

Date of Birth: _____
(Month) (Day) (Year)

FAX REQUEST TO: 210-662-8712

NOTIFICATION AND RELEASE FORM

In connection with my application for employment (including contract for services) with Coastal Transport Co., Inc., I understand that a consumer report which may contain public record information is being requested from USIS/DAC and/or other Party or Agency contacted by Coastal Transport Co., Inc. These reports may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, accidents, spills, mixtures, alcohol/drug test results (49CFR 382.413), etc. I further understand that such reports may contain public record information concerning my driving record, workers' compensation claims, criminal records, etc., from federal state and other agencies which maintain such records; as well as information from USIS/DAC concerning previous driving record requests made by others from such state agencies, and state provided driving records.

I AUTHORIZE WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY COASTAL TRANSPORT CO., INC. TO FURNISH THE ABOVE-MENTIONED INFORMATION.

I have the right to make a request to USIS/DAC, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the sources of information; and the recipients of any reports on me which USIS/DAC has previously furnished within the two year period preceding my request. I hereby consent to your obtaining the above information from USIS/DAC, and I agree that such information which USIS/DAC has or obtains, and my employment history with you if I am hired will be supplied by USIS/DAC to other companies which subscribe to USIS/DAC.

I release employers and other persons from any and all liability which may result from furnishing such information.

Print Name

Social Security Number

Applicant's Signature

Date

Witness Signature

Date

Notice to California Applicants

Under California law, the consumer reports we order on you for employment purposes within the State of California are defined as investigative consumer reports. These reports may contain information on your character, general reputation, personal characteristics and mode of living. Under section 1786.22 of the California Civil Code, you may view the file maintained on you by USIS during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at USIS in person or by mail. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification.

I request to receive a free copy of any investigative consumer report ordered on me by checking this box. (California applicants only).