



Employment Application

bbsupplystores.com

B&B Supply Stores, LLC | P.O. Box 229 Franklin, AR 72536

Phone: (870) 322-7201 | Fax: (870) 322-7041

Name _____ Phone # _____ Date of Birth _____

*Current Address _____ City _____ State _____ Zip _____

*If you have lived in the the residence listed above less than three years, list below all residences for the past three years. Attach a separate sheet if necessary.

Address _____ City _____ State _____ Zip _____

Address _____ City _____ State _____ Zip _____

Position applying for _____ Temporary Part Time Full Time

Who referred you? _____ Rate of pay expected? _____

Have you worked for this company before? _____ Dates: From _____ To _____
month/year month/year

Which location? _____ Rate of Pay _____ Position _____

Reason for leaving _____

Names of any relatives employed by this company _____

Are you currently employed? _____ If not, how long since leaving last employment? _____

Education

High School: _____ Years Attended: From _____ To _____ Did you graduate? _____

College: _____ Years Attended: From _____ To _____ Degree _____

Other _____ Years Attended: From _____ To _____ Degree _____

General

Have you ever been bonded? _____ Name of bonding company _____
(Answer only if a job requirement?)

Have you ever been convicted of a felony? _____

If yes, please explain fully on a separate sheet of paper. Conviction of a crime is not an automatic bar to employment - all circumstances will be considered.

Employment Record

The U.S. Department of Transportation requires that driver applications show all employment for the past three years. Effective July 1987 they must also show commercial driver employment for the seven years immediately preceding this year period. (§391.21(b)(2)).

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

Current Employer _____ Supervisor's Name _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Positions Held: _____ From _____ To _____ Salary _____

Reason for leaving _____

Current Employer _____ Supervisor's Name _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Positions Held: _____ From _____ To _____ Salary _____

Reason for leaving _____



Driver Experience & Qualifications

Answer the questions in this section only if applying for driver position

Date of Birth _____ The U.S. Department of Transportation requires that driver applicants state their date of birth (§391.21(b)(2)).

Licenses (Drivers licenses held in the past 3 years must be shown)

State _____ License # _____ Class _____ Endorsement _____ Expiration Date _____

State _____ License # _____ Class _____ Endorsement _____

State _____ License # _____ Class _____ Endorsement _____

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes ____ No ____

B. Has any license, permit or privilege ever been suspended or revoked? Yes ____ No ____

C. Have you ever been disqualified for violations of the Federal Motor Carrier Safety Regulations? Yes ____ No ____

If you answered 'Yes' to A, B, or C, attach a statement giving the details.

Driver Experience

Class of Equipment _____ Type of Equipment _____
Straight Truck, Tractor, and Semi-Trailer, etc. Type of Equipment (Van, Tank, Flat, etc.)

Dates Driven _____ Approximate Total miles _____

Class of Equipment _____ Type of Equipment _____
Straight Truck, Tractor, and Semi-Trailer, etc. Type of Equipment (Van, Tank, Flat, etc.)

Dates Driven _____ Approximate Total miles _____

List states operated in during the last five years _____

List special courses or training that will help you as a driver _____

List driving awards held and who awards were presented by _____

Accident Review for the past 3 years (Attach a separate sheet of paper if more space if needed)

Dates _____ Nature of Accident _____

Fatalities _____ Injuries _____

Dates _____ Nature of Accident _____

Fatalities _____ Injuries _____

Traffic Convictions and Forfeitures for the past 3 years other than parking violations

(Attach a separate sheet of paper if more space if needed)

Location _____ Date _____

Charge _____ Penalty _____

Location _____ Date _____

Charge _____ Penalty _____

Location _____ Date _____

Charge _____ Penalty _____



Maintenance Experience & Qualifications

List courses and training in maintenance work _____

Job Function Indicate training and experience in the following:

	Formal Training	Years of Experience
Driveline components	_____	_____
Diesel Engine Tune-Up	_____	_____
Diesel Engine Rebuild	_____	_____
Gas Engine Tune-Up	_____	_____
Gas Engine Rebuild	_____	_____
Trailer Repair	_____	_____
Air Conditioning	_____	_____
Tire Service	_____	_____

	Formal Training	Years of Experience
Body Work	_____	_____
Electrical	_____	_____
Repair	_____	_____
Frame	_____	_____
Wheel Alignment	_____	_____
Brakes	_____	_____
Cooling System	_____	_____
General Car Repair	_____	_____
Inspections	_____	_____

Shop Equipment Indicate training and experience in the following:

	Formal Training	Years of Experience
Electrical Diagnostic	_____	_____
Equipment	_____	_____
Sheet Metal Equipment	_____	_____
Frame & Axle	_____	_____
Straightening Equipment	_____	_____
Engine Rebuilding	_____	_____
Diesel Injection Equipment	_____	_____
Electrical Welder	_____	_____
Oxyacetylene Welder	_____	_____
Paint Spray Gun	_____	_____
Air Conditioning	_____	_____

	Formal Training	Years of Experience
Time Servicing Machine	_____	_____
Wheel & Tire	_____	_____
Balancing Machine	_____	_____
Tire Recapping Mold	_____	_____
Engine	_____	_____
Dynamometer	_____	_____
Chassis Dynamometer	_____	_____
Magnetic Crack	_____	_____
Defector	_____	_____
Engine Analyzer	_____	_____
Noise Measuring	_____	_____
Equipment	_____	_____
Smoke Measuring	_____	_____
Inspections	_____	_____
General Car Repair	_____	_____

Clerical Experience & Qualifications

List courses and training in office work _____

Indicate training and experience in the following:

	Formal Training	Years of Experience
Typing (wpm)	_____	_____
Quickbooks	_____	_____
Billing	_____	_____
Filing	_____	_____
Computers (indicate software)	_____	_____
Microsoft Office	_____	_____
Scanning	_____	_____
Adobe	_____	_____
Adding Machine	_____	_____
GSuite	_____	_____
Photocopier	_____	_____

	Formal Training	Years of Experience
Epicor	_____	_____
Accounting	_____	_____
Cashier	_____	_____
Dispatcher	_____	_____

Rates (indicate tariffs with which you have worked) _____



Applicant Must Read and Sign

I certify that I have read and understood all of this employment application. It is agreed and understood that B&B Supply Stores, LLC or its 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 further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the employer and for no other reason.

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 rules and policies of the employer.

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 Signature _____ Date _____

For Office Use - Do Not Write in the Space

Process Record

If not hired, summary report of reasons should be placed in file.

Applicant Hired? _____ Date of Birth (m/d/y) _____ Date Employed _____

Point Employed _____ Department _____ Classification _____

In case of an emergency, notify _____ Phone number _____

Address _____ City _____ State _____ Zip _____

This section should be filled in by responsible officer or company representative

On a scale from 1 - 10 (1 being Poor and 10 being Superior) rate the following:

Application _____

Interview _____

Physical Exam* _____

*Driver Applicants Only

Past Employment _____

Written Exam _____

Road Test _____

Policy and Traffic Record _____

X _____
Date

X _____
Signature of Interviewing Officer

Termination of Employment

Date Terminated _____ Department Released From _____

Dismissed _____ Voluntarily Quit _____ Other _____

Termination Report Placed in file _____ Supervisor _____