



# Employment Application

bbsupplystores.com

B&B Supply Stores, LLC | P.O. Box 709 Ash Flat, AR 72513

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

Name \_\_\_\_\_ Phone # \_\_\_\_\_

\*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 \_\_\_\_\_