

# APPLICATION FOR EMPLOYMENT OFFICE STAFF

## BUDDE ENTERPRISES

4504 NE 36<sup>th</sup> Street  
Newton, KS 67114  
(316) 283-3366

We are an Equal Opportunity Employer and do not unlawfully discriminate in employment. Qualified applicants are considered for all positions without regard to race, color, religion, national origin, age, marital status, veteran status, non-job disability, or any other protected group status.

Name \_\_\_\_\_ Date of application \_\_\_\_\_  
Last First Middle

Driver's License No. \_\_\_\_\_ Social Security No. \_\_\_\_\_

List your addresses of residency for the past 3 years.

Current Address \_\_\_\_\_  
Street City

State Zip Code Phone \_\_\_\_\_ How Long? \_\_\_\_\_  
yr./mo.

Previous Addresses \_\_\_\_\_ How Long? \_\_\_\_\_  
Street City State & Zip Code yr./mo.

Street City State & Zip Code How Long? \_\_\_\_\_  
yr./mo.

Street City State & Zip Code How Long? \_\_\_\_\_  
yr./mo.

Position(s) applying for: \_\_\_\_\_

Type of position desired: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary \_\_\_\_\_

Do you have any objection to working overtime if necessary? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any objection to working Saturdays? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to be on call? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you travel if required to do so? Yes \_\_\_\_\_ No \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

Do you have the legal right to work in the United States? \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Can you provide proof of age? \_\_\_\_\_  
(Required for Commercial Drivers)

Are you currently employed? \_\_\_\_\_ What is/was your reason for leaving? \_\_\_\_\_

Rate of pay expected? \_\_\_\_\_

Will your previous employer give a favorable reference? \_\_\_\_\_ When would you be able to start work? \_\_\_\_\_

Have you ever been fired from a job? \_\_\_\_\_ If so, why? \_\_\_\_\_

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.

## DRIVING EXPERIENCE & QUALIFICATIONS

### DRIVER LICENSES

STATE	LICENSE NO.	TYPE	EXPIRATION DATE

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 \_\_\_\_\_

IF THE ANSWER TO EITHER A OR B IS YES, GIVE DETAILS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

C. Do you currently have a valid driver license? YES \_\_\_\_\_ NO \_\_\_\_\_

### DRIVING RECORD

Accident Record for the past 3 years or more - if none, write NONE

NATURE OF ACCIDENT (HEAD-ON, REAR-END, UPSET, ETC.)	DATE	FATALITIES	INJURIES

(Attach sheet if more space is needed)

Traffic convictions and forfeitures for the past 3 years (other than parking violations) – if none, write NONE

LOCATION	DATE	CHARGE	PENALTY

(Attach sheet if more space is needed)

### DRIVING EXPERIENCE

Equipment experience – if none, write NONE

	CLASS OF EQUIPMENT	TYPE OF EQUIPMENT (VAN, TANK, FLAT, ETC.)	FROM DATE	TO DATE	APPROX. NO. OF MILES (TOTAL)
	STRAIGHT TRUCK				
	TRACTOR & SEMI-TRACTOR				
	OTHER				

Which awards do you hold and from whom of for what? \_\_\_\_\_

Show any experience that may help you in your work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### JOB SKILLS & QUALIFICATIONS

Describe any previous out of the office employment you have had: shipping, inventory, farm, parts delivery

\_\_\_\_\_

\_\_\_\_\_

Job skill experience – Please rate your experience level from 1-10 (1 being little to no experience 10 being very experienced)

Job Skill	Yrs of Exp	Rating/Capacity of Exp (Job or Personal)
General Quick Books		
Payroll		
Excel		
Word		
Filing		
Phone Answering		
Inventory		
Automotive/Farm/Industrial Environment		
DOT Requirements		
Accounts Payable & What Acct. Program		
Accounts Receivable & What Acct. Program		
Human Resources		
Insurance		
Parts Handling in &/or out		
General Computer Skills; net work, digital camera etc.		
Banking		
Clerical		
Phone Skills (Ordering parts/Technical data)		

### EDUCATION & TRAINING

Circle highest grade completed: 1 2 3 4 5 6 7 8      High School: 1 2 3 4      College: 1 2 3 4

Last school attended \_\_\_\_\_

(Name) (City)

List courses, special training or licenses other than shown elsewhere in this application \_\_\_\_\_

List special equipment or technical materials you can work with (other than those already shown) \_\_\_\_\_

Please share your general computer knowledge & what programs you have worked with:

\_\_\_\_\_  
 \_\_\_\_\_

What specific skills are you working to improve and what steps are you taking to improve those?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## EMPLOYMENT HISTORY

**Please provide previous employment information for the last three years starting with the most recent.**

(List complete address, city, state, zip code & phone number)

(NOTE: Add another sheet as necessary.)

EMPLOYER		DATE	
NAME	FROM MO.    YR.		TO MO.    YR.
ADDRESS		POSITION HELD	
CITY	STATE	ZIP	
CONTACT PERSON		PHONE NUMBER	
REASONING FOR LEAVING			
DID YOU DRIVE A VEHICLE REQUIRING A CDL?			

EMPLOYER		DATE	
NAME	FROM MO.    YR.		TO MO.    YR.
ADDRESS		POSITION HELD	
CITY	STATE	ZIP	
CONTACT PERSON		PHONE NUMBER	
REASONING FOR LEAVING			
DID YOU DRIVE A VEHICLE REQUIRING A CDL?			

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REASONING FOR LEAVING			
DID YOU DRIVE A VEHICLE REQUIRING A CDL?			

\*Includes vehicles having a GVWR of 26,001 lbs. Or more, vehicles designed to transport 15 or more passengers, or any size vehicle used to transport hazardous materials in a quantity requiring placarding.

## CHARACTER REFERENCES

List three character references, **including at least one previous employer**.

Name	Address, City, State & Zip	Phone Number	Relationship/Years Acquainted

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### TO BE READ AND SIGNED BY APPLICANT

I hereby authorize the potential employer to contact, obtain and verify the accuracy of information contained on this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered. If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within five days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment. I understand, also, that I am required to abide by all rules and regulations of Budde Enterprises.

\_\_\_\_\_

Date

\_\_\_\_\_

Applicant's Signature

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### PROCESS RECORD

Applicant hired \_\_\_\_\_ Rejected \_\_\_\_\_

Date employed \_\_\_\_\_

This section to be filed in by company representative

	SUPERIOR	GOOD	FAIR	BELOW AVERAGE	POOR	WRITTEN RECORD ON FILE
APPLICATION						
INTERVIEW						
PAST EMPLOYMENT						
WRITTEN TEST						
ROAD TEST						
CRIMINAL & TRAFFIC CONVICTIONS						

### TERMINATION OF EMPLOYMENT

Date Terminated \_\_\_\_\_ Eligible for rehire? Yes \_\_\_\_\_ No \_\_\_\_\_

Dismissed \_\_\_\_\_ Voluntarily quit \_\_\_\_\_ Other \_\_\_\_\_