

# FBL & Associates Employment Application

Program, services, and employment are equally available to everyone. Please inform the Human Resources Dept. if you require reasonable accommodation for the application or interview.

DATE:	

**APPLICATION DATA:**  
How were you referred to us:

Position Applied for:

Full Name:

Address: City State Zip

Phone (    ) Cell:

Date Available to Start: Salary Desired:

Our Automobile Insurance Carrier requires our drivers to be 21 yrs of age or older. Can you meet these requirements? 

Yes	No
-----	----

If you are under 18 and we require a work permit, can you furnish one? 

Yes	No
-----	----

Have you ever worked for this company 

Yes	No
-----	----

If yes, when?

Are you a Citizen of the United States? 

Yes	No
-----	----

If no, please explain:

Employment here requires full time and out of town; Will this be a problem? 

Yes	No
-----	----

I understand that employment is contingent upon successfully completing pre-employment and random drug testing.

Have you ever pleaded "guilty", "no contest," or been convicted of a crime? 

Yes	No
-----	----

If yes, give dates and details.

Answering "yes" to these questions does not constitute an automatic rejection of employment. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.

Since our site locations are usually out of town, regular attendance & promptness are required.

Would there be anything to prevent you from meeting these requirements? 

Yes	No
-----	----

**PREVIOUS EMPLOYMENT (begin with most recent positions)**

**Dates of Employment: From** \_\_\_/\_\_\_/\_\_\_ **To:** \_\_\_/\_\_\_/\_\_\_ **Position Held** \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary/Title \_\_\_\_\_ Ending Salary/Title \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference	Yes	No	
----------------------------------------------	-----	----	--

**Dates of Employment: From** \_\_\_/\_\_\_/\_\_\_ **To:** \_\_\_/\_\_\_/\_\_\_ **Position Held** \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary/Title \_\_\_\_\_ Ending Salary/Title \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference	Yes	No	
----------------------------------------------	-----	----	--

**Dates of Employment: From** \_\_\_/\_\_\_/\_\_\_ **To:** \_\_\_/\_\_\_/\_\_\_ **Position Held** \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary/Title \_\_\_\_\_ Ending Salary/Title \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference	Yes	No	
----------------------------------------------	-----	----	--

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for any employment decision. I hereby release employers, schools or individuals from all liability when responding to inquires in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____	Date: _____
-------------------------------	-------------