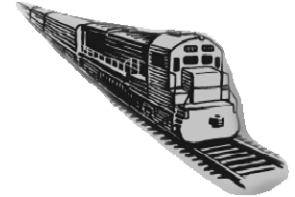


Track Services, Inc.



PO Box 4134 Bartonville, IL 61607

Phone: 309-633-2307

Fax: 309-633-2308

E-mail: info@tntrackservices.com

TSI

AUTHORIZATION FOR BACKGROUND CHECK

(Please read and sign this form in the space provided below. Your written authorization is necessary for completion of the application process.)

I, _____, hereby authorize Track Services, Inc. to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that Track Services, Inc. will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

Signature of Employee

Date

Employee's Name - Printed

TRACK SERVICES, INC.
APPLICATION FOR EMPLOYMENT
APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

Personal Data

Name _____

Last
First
Middle

Present Address _____

Number and Street
City
State
Zip

Permanent Address (if other than above) _____

Number and Street
City
State
Zip

Telephone () _____ If under 18, please list age _____

Cell () _____ Social Security Number: _____

For reference purposes, have you ever been known by any other name? NO YES Name: _____

If hired, are you able to provide documentation confirming your eligibility to work in the United States? Yes No

Have you previously applied for employment with Track Services, Inc? NO YES Dates: _____

Have you previously worked for Track Services, Inc? NO YES Dates: (from/to) _____

What led you to apply at Track Services, Inc (check one):

Own Initiative: Walk-In Write-In Other (specify): _____

Answered Ad: Walk-In Write-In

Referred By: Walk-In Temporary Agency Employee _____

Are you willing to relocate? Yes No Geographical Preference: _____ Geographical Limitations (specify) _____

Are you willing to travel for extended periods? Yes No Date available for employment: _____ Salary Desired: _____

Type of work desired (check one) Full-time Part-time Temporary Summer Employment

Title of position applied for: _____

Education

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete Mailing Address)	# OF YEARS COMPLETED	Credits Earned	MAJOR / MINOR
High School					
College					
Bus or Trade School					

Employment History

Start with your present or most recent employer. You may include military service, summer positions and volunteer work experience.
Attach a separate page as needed to fully cover your employment history.

Employer (current or most recent)	<input type="checkbox"/> OK to Contact	Dates Employed (month/year) From: _____ To: _____
Address		Phone (area code and number) () _____
Position	<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time	Starting Salary _____ Ending Salary _____
Duties		
Supervisor's Name and Title		
Reason for Leaving		

Employer	<input type="checkbox"/> OK to Contact	Dates Employed (month/year) From: _____ To: _____
Address		Phone (area code and number) () _____
Position	<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time	Starting Salary _____ Ending Salary _____
Duties		
Supervisor's Name and Title		
Reason for Leaving		

Employer	<input type="checkbox"/> OK to Contact	Dates Employed (month/year) From: _____ To: _____
Address		Phone (area code and number) () _____
Position	<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time	Starting Salary _____ Ending Salary _____
Duties		
Supervisor's Name and Title		
Reason for Leaving		

Employer	<input type="checkbox"/> OK to Contact	Dates Employed (month/year) From: _____ To: _____
Address		Phone (area code and number) () _____
Position	<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time	Starting Salary _____ Ending Salary _____
Duties		
Supervisor's Name and Title		
Reason for Leaving		

Have you ever been discharged or requested to resign from a position? No Yes

Explain:

Additional Information

If the position you are seeking involves travel in personal or company vehicles, please indicate the following:

Current Driver's License Number:	States in which you have held a driver's license:
<input type="checkbox"/> Operator's License <input type="checkbox"/> Commercial (CDL)	Date of Expiration:
Have you had any driving violations or accidents for the last 3 years? <input type="checkbox"/> No <input type="checkbox"/> Yes (explain)	
I hereby authorize Track Services, Inc. or any employee thereof to verify my driving record with the State Department of Motor Vehicles: <input type="checkbox"/> No <input type="checkbox"/> Yes Initial _____	
Can you operate heavy equipment? <input type="checkbox"/> No <input type="checkbox"/> Yes Experience:	
Have you ever been convicted or pleaded guilty to a criminal offense? <input type="checkbox"/> No <input type="checkbox"/> Yes (give details)	
Do you have any present business interests or relationships that might be construed to conflict with your duties with us? <input type="checkbox"/> No <input type="checkbox"/> Yes (explain)	
Can you perform the job functions of the position for which you are applying with or without a reasonable accommodation? <input type="checkbox"/> No <input type="checkbox"/> Yes (explain)	

Applicant's Consent and Understanding

Upon signing this application, I acknowledge that Track Services, Inc (the Company) relies on information provided by me for employment consideration. I understand that false information, misrepresentation, or concealment are grounds for my dismissal at any time during my employment. I understand my employment is conditional upon the Company obtaining information, including, but not limited to, my employment, education, credit, prior work, including my disciplinary record, general reputation, and character. I authorize the Company to obtain such information or verification from any source as required without any obligation to provide me with written notice of such disclosure. I understand that this serves as notice under the Federal Fair Credit Reporting Act that a consumer report to obtain such information maybe procured. I hereby release the Company and all such sources from any liability as a result of such inquiries and disclosures.

In consideration of my employment, I agree to conform to the rules and regulations of the Company. I understand and agree that my employment is for an indefinite period of time and that my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, at the option of either the Company or myself. I further understand that the Company's policies and procedures are merely guidelines that are subject to change at the sole discretion of the Company and that they do not constitute contracts of employment. I understand that no representative of the Company other than the President of the Company has authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing. All agreements shall be expressly stated in writing directed to me personally and signed by the President of the Company.

X

Your Signature

Date

Office Use Only

<input type="checkbox"/> Hired <input type="checkbox"/> Waived <input type="checkbox"/> Date: _____ <input type="checkbox"/> Initials: _____		
Job Title	Starting Date:	Starting Salary:
Interviewed by:	Status or Reason Not Hired:	