

APPLICATION FOR DRIVING INSTRUCTOR

FOR WORK AS AN INDEPENDENT CONTRACTOR (1099)

APPLICANT INFORMATION						
Last Name	First	M.I.	Date			
Street Address			Apartment/Unit #			
City	State	ZIP				
Phone	E-mail Address					
Date Available		Social Security No.				
Availability:						
Mon _____ to _____	Tues _____ to _____	Wed _____ to _____	Thurs _____ to _____	Fri _____ to _____	Sat _____ to _____	Sun _____ to _____
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>						
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?						
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain						
EDUCATION						
High School		Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
College		Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
REFERENCES						
<i>Please list three personal references.</i>						
Full Name			Relationship			
Company			Phone ()			
Address						
Full Name			Relationship			
Company			Phone ()			
Address						
Full Name			Relationship			
Company			Phone ()			
Address						

PLEASE TURN OVER ----->

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
GENERAL			
Special Skills			
Special Training			
Subjects of Special Study			
DISCLAIMER AND SIGNATURE			
I certify that my answers are true and complete to the best of my knowledge.			
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.			
Signature			Date