## Roger Sitterly & Son, Inc.

270 Liberty St. * P.O. Box 2530	* Springfield, MA 01101-2530
www.sitterlymovers.com	E-mail: Info@sitterlymovers.com

Employment Application

South Deerfield, MA Tel. (413) 665-2121

**APPLICANT DATA:** 

Springfield, MA Tel. (413) 737-2641 Amherst, MA Tel. (413) 253-2200 **<u>NOTE</u>**: You must be 18 years of age or older in order to be eligible for employment at Roger Sitterly & Son, Inc., an agent for Atlas Van Lines.

Full Name (last, first middle):			Today's Date: / / /	
Address:			Social Security #:	
City:	State:	ZIP:	Date of Birth: / /	
			E-mail:	
How were you referred to us?			Available to start: / /	
Type of employment desired: [	🗌 Full-Time 🔲 Part-Tim	e 🗌 Summe	er/Seasonal 🗌 Temporary, thru/	
Position applying for: Drive	er, Class A 🛛 Driver, C	lass B	Driver, Class C / D $\Box$ Helper $\Box$ O	Office
-	0	•	c. must be able to speak, read, write, and vility to lift and carry at least 80 pounds.	
Do you have any medical condition	on(s) that could interfere with	the job requi	rements listed above? $\Box$ Yes $\Box$ N	0
If you answered Yes, please expla	in:			
-		• •	<b>Saturday</b> , except for approved time off.	
-		-	working away from the local area.	
Are you available to be scheduled		•		
If No, please explain:				
Are you available to stay overnigh	t when working at jobs outsid	de the local are	ea? 🗆 Yes 🗆 No	
Are you a legal citizen of the Unit	ed States? 🗌 Yes 🗌 No	o If not, do y	ou have work papers? 🛛 Yes 🗌 No	
Have you ever worked for this con	npany before? $\Box$ Yes $\Box$ N	Io If yes, when	n?	
Have you ever pled "guilty" or "no	o contest" to or been convicte	d of a crime or	misdemeanor?	
If yes, please give dates and detai	ls:			
offense, seriousness and nature of	f the violation, rehabilitation	ı, and position	ic rejection to employment. The date of the applied for will be considered. Class: Expires //	
EDUCATION DATA:		8		
		Address:		
			Not yet Date:/ GPA:	
College/University Name:		Address:		
			Not yet Date: / GPA:	
 Major:	Minor:		Degree:	
Sitterly Movers is an Interstate Agent for	r Atlas Van Lines			

Technical/Trade School Name:			Address:		
# of years completed:	Did you graduate?	□ Yes □ No □	Not yet Date: /	_/ GPA:	
 Employment A	pplication (cont'd.)	Name:			
Do you have any skills or spe					
packing experience, fork true					
PREVIOUS EMPLOY	MENT: (Please begin	n with your most <u>p</u>	<u>recent</u> position)		
L. Company Name:					
Phone #: ( )			Supervisor's Title	e:	
Start Date: /	/ Starting Title:		Starting Salary: _		
End Date: /			Ending Salary: _		
Responsibilities:					
Reason for Leaving:			May we con	tact? 🗌 Yes 🗌	
No					
2. Company Name:		Address:			
Phone #: ( )	Supervisor:		Supervisor's Title	e:	
Start Date: /	/ Starting Title:		Starting Salary: _		
End Date: /	/ Ending Title:		Ending Salary: _		
Responsibilities:					
Reason for Leaving:			May we con	tact? 🗌 Yes 🗌	
No					
<b>3.</b> Company Name:		Address:			
Phone #: ( )	Supervisor:		Supervisor's Titl	e:	
Start Date: /	/ Starting Title:		Starting Salary: _		
End Date: /	/ Ending Title:		Ending Salary: _		
Responsibilities:					
Reason for Leaving:				tact? 🗆 Yes 🗆	
No			-		
<b>REFERENCES:</b>					
Please provide the name, addres	ss, and phone number of two	people (not relatives or f	ormer employers) that we n	ay contact for referen	
<b>1.</b> Name:	-			-	
Address:		City:	State:	ZIP:	
- Norma			Phone Number: (	)	

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South Deerfield, MA Tel. (413) 665-2121	Springfield, MA Tel. (413) 737-2641	Tel. (413) 253-2200	Sitterly & Son, Inc., an agent	for Atlas Van Lines.
Address:		City: _	State:	ZIP:
EMERGENCY C	ONTACTS: (It is <u>N</u>	<u>MANDATORY</u> that thi	s section be completed.)	
1. Name:			Phone Number: (	)
Address:		City: _	Relation	:
<b>2.</b> Name:			Phone Number: (	)
Address:		City: _	Relation	:
		enty:_		•

### CONSUMER REPORT DISCLOSURE AND RELEASE

#### DISCLOSURE

In connection with your employment or application for employment (including for contract services), consumer reports may be requested from U.S.I.S. Commercial Services ("USIS"). These reports may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, accidents, academic history, professional credentials, and drug/alcohol use. Such reports may contain public record information concerning your driving record, workers' compensation claims, credit, bankruptcy proceedings, criminal records, etc., from federal, state, and other agencies which maintain such records; as well as information from USIS concerning previous driving record requests made by others from such state agencies and state provided driving records.

You have the right to make a request to USIS, upon proper identification, to request the nature and substance of all information in its files on you at the time of your request, including the sources of information and the recipients of any reports on you that USIS has previously furnished within the two-year period preceding your request. USIS may be contacted by mail at P.O. Box 33181, Tulsa, Oklahoma, 74153, or by phone at (800) 381-0645.

#### **RELEASE**

# I AUTHORIZE, WITHOUT RESERVATION, USIS, AND ANY PARTY OR AGENCY CONTACTED BY USIS, TO FURNISH THE ABOVE-MENTIONED INFORMATION.

USIS is authorized to disclose all information obtained to the requesting entity for the purpose of making a determination as to my eligibility for employment, promotion, or any other lawful purpose. I agree that such information which USIS has or obtains, and my employment history if I am hired, may be supplied by USIS to other companies that subscribe to USIS. If hired or contracted, this authorization shall remain on file and serve as ongoing authorization for the procurement of consumer reports at any time during my employment or contract period.

By signing below, I certify that I have read and fully understand this release, that prior to signing, I was given the opportunity to ask questions and to have those questions answered to my satisfaction, and that I executed this release voluntarily and with the knowledge that the information being released could affect my being hired, my employment, or my eligibility for promotion.

Signature:

Date: \_\_\_\_\_

Social Security #:

Printed Name: \_\_\_\_\_

DISCLOSURE,	RELEASE,	AND SIGNATURE:	

I certify that my answers to all questions contained within this application are truthful and complete to the best of my knowledge. I authorize Roger Sitterly & Son, Inc. to make such investigations and inquiries of my personal, employment, educational, financial, and/or medical history and other related matters as may be necessary for an employment decision to be made. I hereby release past employers, schools, or persons from all liability in responding to inquiries in connection with my application for employment with Roger Sitterly & Son, Inc.

In the event that I am employed, I understand that providing false or misleading information given in my application or interview(s) may be grounds for immediate discharge. I understand that, if hired, the first 90 days of employment are a trial period. I understand that employment at Roger Sitterly & Son, Inc. is at will, and may be terminated at any time.

By signing below, I agree to all stipulations and disclosures listed within this employment application, and I certify I meet the minimum physical requirements to perform the job(s) for which I am applying. I certify that I have no pre-existing medical conditions that would prevent me from performing the duties of my job, if hired. I declare that I can speak, read, write, and understand the English language.

 Signature:
 Date: