



6442 Windy Road
Las Vegas, NV 89119

Driver's Application for Employment

Applicant Name _____ **Date of Application** _____

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color religion, sex, national origin, age, marital status, veteran status, non-job related disability, or any other protected group status.

To be read and signed by Applicant

I authorize you to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision.

(Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended.) I hereby release employers, schools, health care providers and others persons from all liability in responding to inquiries and releasing information in connection with my application.

In the event of employment, I understand, also, that I am required to abide by all rules and regulations of Earth Limos & Buses.

I understand that information I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted, for the purpose of investigating my safety performance history as required by 49 CFR 391.23(d) and (e). I understand that I have the right to:

- Review information provided by previous employers;
- Have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and
- Have a rebuttal statement attached to the alleged erroneous information, if previous employer(s) and I cannot agree on the accuracy of the information.

Applicant Signature _____ **Date** _____

By signing above you are authorizing Earth Limousines, LLC and/or Earth Buses, LLC to perform the necessary inquiries described in the statement above.

For Company Use Process Record

Applicant Hired _____ Rejected _____
Date Employed _____ Point employed _____
Department _____ Classification _____

Signature of interviewing officer _____

Termination of Employment

Date Terminated _____ Department Released From _____
Dismissed _____ Voluntarily Quit _____ Other _____
Termination Report Place In File _____ Supervisor _____



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Applicant to Complete

Position(s) Applied for _____

Name _____ Social Security No. _____

Last **First** **Middle**

List your addresses of residency for the past 3 years.

Current Address _____

Street _____ City _____ Phone _____ How Long? _____

Previous Address _____ State _____ Zip Code _____ yr. /mo.

How Long? _____

Street _____ City _____ State & Zip Code _____ yr. /mo.

How Long? _____

Street _____ City _____ State & Zip Code _____ yr. /mo.

How Long? _____

Street _____ City _____ State & Zip Code _____ yr. /mo.

Do you have the right to work in the United States? _____

Date of Birth ____/____/____ Can you provide proof of age? _____

Have you worked for Earth Limos and Buses before? _____ When? _____

Dates: From _____ To _____ Rate of Pay _____ Position _____

Reason for leaving _____

Are you now employed? _____ If not, how long since leaving last employment? _____

Who referred you? _____ Rate of pay expected _____

Have you ever been bonded? _____ Name of the bonding company _____

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.

Is there any reason you might not be able to perform the functions of the job which you have applied [as described in the attached job description]?

If yes, explain if you wish.



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Employment History

All driver applicants to drive in interstate commerce must provide the following information on all employers during the preceding 10 years. List complete mailing address, street numbers, city, state and zip code.

Employer			Dates: From	To
_____			Mo. Yr.	Mo. Yr.
Address			Position Held	
_____			Salary/wage	
City	State	Zip	Reason for Leaving	
_____	_____	_____	_____	
Contact Person	Phone Number		_____	
_____	_____		_____	

Were you subject to the FMCSRs (Federal Motor Coach Safety Regulations) while employed?
 Yes No

Were you subject to DOT regulated drug and alcohol testing at your last place of employment (rule 49 CFR 40)? Yes NO

Employer			Dates: From	To
_____			Mo. Yr.	Mo. Yr.
Address			Position Held	
_____			Salary/wage	
City	State	Zip	Reason for Leaving	
_____	_____	_____	_____	
Contact Person	Phone Number		_____	
_____	_____		_____	

Were you subject to the FMCSRs (Federal Motor Coach Safety Regulations) while employed?
 Yes No

Were you subject to DOT regulated drug and alcohol testing at your last place of employment (rule 49 CFR 40)? Yes NO

Employer			Dates: From	To
_____			Mo. Yr.	Mo. Yr.
Address			Position Held	
_____			Salary/wage	
City	State	Zip	Reason for Leaving	
_____	_____	_____	_____	
Contact Person	Phone Number		_____	
_____	_____		_____	

Were you subject to the FMCSRs (Federal Motor Coach Safety Regulations) while employed?
 Yes No

Were you subject to DOT regulated drug and alcohol testing at your last place of employment (rule 49 CFR 40)? Yes NO



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Employment History (Continued)

Employer _____ Dates: From _____ To _____
Mo. Yr. Mo. Yr.
Position Held _____
Address _____
City _____ State _____ Zip _____ Salary/wage _____
Reason for Leaving _____
Contact Person _____ Phone Number _____

Were you subject to the FMCSRs (Federal Motor Coach Safety Regulations) while employed?
 Yes No
Were you subject to DOT regulated drug and alcohol testing at your last place of employment (rule 49 CFR 40)? Yes NO

Employer _____ Dates: From _____ To _____
Mo. Yr. Mo. Yr.
Position Held _____
Address _____
City _____ State _____ Zip _____ Salary/wage _____
Reason for Leaving _____
Contact Person _____ Phone Number _____

Were you subject to the FMCSRs (Federal Motor Coach Safety Regulations) while employed?
 Yes No
Were you subject to DOT regulated drug and alcohol testing at your last place of employment (rule 49 CFR 40)? Yes NO

Employer _____ Dates: From _____ To _____
Mo. Yr. Mo. Yr.
Position Held _____
Address _____
City _____ State _____ Zip _____ Salary/wage _____
Reason for Leaving _____
Contact Person _____ Phone Number _____

Were you subject to the FMCSRs (Federal Motor Coach Safety Regulations) while employed?
 Yes No
Were you subject to DOT regulated drug and alcohol testing at your last place of employment (rule 49 CFR 40)? Yes NO



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Accident Record for past 3 years or more (attached sheet if more space is needed) if none, write **none**

Dates	Nature of accident (Head-on, rear-end, upset, ECT.)	Fatalities	Injuries	Hazardous Material Spill
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Last Accident

Next Previous

Next Previous

Traffic Convictions and forfeitures for the past 3 years (other than parking violations) if none, write **none**

Location	Date	Charge	Penalty
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(attach sheet if more space is needed)

Experience and Qualifications—Driver

List all driver licenses or permits held in the past 10 years

State	License NO.	Type	Expiration Date
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Driver _____

Licenses _____
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 _____

Driving Experience check yes or no

Class of Equipment	Yes____ No____		Circle Type of Equipment (van, tank, flat, dump, refer)	Dates From (M/Y) To (M/Y)		Approx. No. of miles
	Straight Truck	Yes____ No____		(van, tank, flat, dump, refer)	_____	
Tractor and semi-trailer	Yes____ No____	(van, tank, flat, dump, refer)	_____	_____	_____	
Motorcoach-School Bus	Yes____ No____	more than 8 pass. ----	_____	_____	_____	
Motorcoach-School bus	Yes____ No____	more than 15 pass. ----	_____	_____	_____	
Other _____			_____	_____	_____	

List States operated in for last five years: _____

List Special courses or training that help you as a driver: _____
List any safe driving awards you hold and from where? _____

Experience and Qualifications-Other

List any trucking, transportation or other experience that may help in your work for this company

List any courses and training other than shown in this application

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

Education

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, state) _____

To be Read and Signed by Applicant

This certifies that this applicant was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.
Signature: _____ **Date:** _____

Applicant Statement

I certify that all information I have provided in order to apply for a secure job with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees, or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president. I understand that I am an "at will" employee.

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that I will provide all required documents for a driving position at my own expense.

I understand that by submitting this application and subsequent testing for the job does not guarantee a position.

I understand that all positions with Earth Limos and Buses have 90 day probationary periods.

I understand that a driving position requires that I must abide by the shift system which is determined by the company.

I understand that, if hired, I will be required to sign my daily log sheet/trip sheet and failure to comply may result in my termination with this company.

I understand that I will be held to a monthly sales quota and if I fall below my assigned quota, this may result in disciplinary action or termination of my position.

I understand that all driving positions are paid on a commission basis on a bi-weekly pay cycle.

I understand that once selected, I will furnish my own clothing, uniform and supplies needed for the job.

I understand that if I quit or am terminated, my last check will be issued within 72 hours.

I understand that frequent call offs, coming in late for a shift, failure to accurately report rides or deliver revenue or insubordination to management or management directives may result in termination of my job with this company.

I also understand that all documents I will submit will become property of the company. I must keep duplicates for my own records. None of the documents will be returned once submitted regardless of the outcome.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

ELECTRONIC SIGNATURE: You consent and agree that your use of a key pad, mouse, or other device to select an item, button, icon, checkbox, to enter text, or to perform a similar act/action while using any Earth Limousines, LLC and/or Earth Buses, LLC owned/operated website, for the purpose of accessing or making any transactions regarding any agreement, acknowledgment, consent, terms, disclosures, or conditions, constitutes your signature, acceptance and agreement as if actually signed by you in writing. You further acknowledge and agree that the taking of any such actions by you evidence your intent to sign any such agreement, acknowledgment, consent, terms, disclosures, or conditions. You also agree that no certification authority or other third party verification is necessary to the validity of your electronic signature; and that the lack of such certification or third party verification will not in any way affect the enforceability of your signature or any resulting contract.



Signature of Applicant

Date

Initials