



Jim-n-i Rentals, Inc.
 380 Sutton Place
 Santa Rosa, CA 95407
 Ph: (707) 569-1600
 Fax: (707) 569-1700

Employment Application

APPLICANT INFORMATION											
Last Name			First			M.I.		Date			
Street Address						Apartment/Unit #					
City				State				ZIP			
Phone				E-mail Address							
Date Available			Social Security No.				Desired Salary				
Position Applied for				Valid California Driver's License? Yes <input type="checkbox"/> NO <input type="checkbox"/> If yes, CDL Class:							
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				
Emergency Contact Name:						Emergency Phone:					
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	
Other			Address								
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree	
REFERENCES											
<i>Please list three professional references.</i>											
Full Name				Relationship							
Company				Phone ()							
Address											
Full Name				Relationship							
Company				Phone ()							
Address											
Full Name				Relationship							
Company				Phone ()							
Address											



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PREVIOUS EMPLOYMENT									
Company					Phone ()				
Address					Supervisor				
Job Title									
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									
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									
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									
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?					YES <input type="checkbox"/>		NO <input type="checkbox"/>		
MILITARY SERVICE									
Branch					From		To		
Rank at Discharge					Type of Discharge				
If other than honorable, explain									
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				



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This page is to be completed by applicants for truck driver positions only

Driver Experience and Qualifications

NAME	LICENSE NO.	STATE	TYPE	EXPIRATION DATE

Driving Experience (Attach sheet if more space is needed)

CLASS OF EQUIPMENT	TYPE OF EQUIPMENT	DATE FROM	DATE TO	APPROX. MILE (TOTAL)
Straight Truck				
Tractor-Trailer				
Tractor-Two Trailers				
Other				

Accident Record for Past 3 Years or More (Attach sheet if more space is needed)

DATES	NATURE OF ACCIDENT	FATALITIES	INJURIES
Last Accident			
Next Previous			
Next Previous			

Traffic Convictions and Forfeitures for the Past 3 Years (Other than Parking Violations)

LOCATIONS	DATE	CHARGE	PENALTY

A: Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes or No _____

B: Has any license, permit or privilege ever been suspended or revoked? Yes or No _____

If the answer is Yes to either question A or B, please attach a statement giving details

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	
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