

MCH TRANSPORTATION CO.
3180 UTICA ST., JACKSON, MS 39209
601-353-9382/800-824-5142

FAX 601-353-8811

Applicant Name _____ Date of Application _____

Current Address _____ City _____

How Long? _____ Phone _____ Cell _____

Previous Address _____

Social Security Number _____ Date of Birth _____

Have you worked for this company before? _____ Terminal? _____

Dates: _____ Reason for Leaving _____

How did you hear about our company? _____

Have you ever been convicted of a felony or DUI? _____ Date _____

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.

APPLICANT MUST READ AND SIGN

I authorize MCH to investigate and inquire of my employment, personal, or other related matters as may be necessary in arriving at employment decision. I release employers and other persons from all liability in responding to inquiries and releasing information concerning my application.

I understand that any information I provide may be used, and those employers may be contacted, to investigate my safety performance history as required by 49 CFR 391.23(d) and (e).

Signature _____ Date _____