

Nellis Cab

APPLICATION FOR EMPLOYMENT

(Please Print — Answer all questions on front and back)

TA#

All applicants will receive consideration for employment without regard to race, color, national origin, sex (including pregnancy), age (40 or older), religion, disability, and sexual orientation. Applications will be considered active for a period of 30 days; if after 30 days, you would like the application to receive consideration for an additional 30 days, return to the Nellis Cab office and complete another employment application.

Position desired _____ Are you 25 or over? Yes No Today's date _____

PERSONAL

Name (Last, First, MI) _____ Name you prefer to be called _____ Social Security Number _____ - _____ - _____

Address _____ City _____ State _____ Zip _____

CELL PHONE NUMBER _____ Years at this address _____ Years in Las Vegas _____

Home Phone Number _____ Email Address _____

Emergency Contact Name _____ Emergency Contact Phone Number _____

Can you immediately upon employment submit proof of your legal right to work in the United States? Yes No

EDUCATION

High School _____ City _____ State _____ Years Completed _____

Did you graduate? Yes No

School/college beyond high school _____ City _____ State _____ Years Completed _____

Do you speak English fluently? Yes No Languages spoken other than English _____

NOTICE TO APPLICANT

Screening test for illegal drug use are required as a condition of employment.

— We are Proud to be a Drug-Free Workplace —

Have you worked for this Company before? Yes No How did you happen to apply here? _____

Are you available to accept full-time employment? Yes No To work any shift needed? Yes No

VALID DRIVER'S LICENSE

State	License Number	Class	Expiration Date

Have you ever been denied a Permit, License, or Privilege to operate a motor vehicle? Yes No

Has your License, Permit, or Privilege been suspended or revoked? Yes No If Yes, explain: _____

List all traffic offenses for the past three years, with dates: _____

Have you ever been convicted of a felony? Yes No If yes, explain. A conviction will not necessarily bar any applicant from employment other than what is required by the Taxicab Authority. The nature of the offense, the surrounding circumstances, and the relevance of the offense to the position applied for will be considered. _____

IMPORTANT: COMPLETE THE OTHER SIDE OF THE FORM FOR PRIOR WORK HISTORY. THAT INFORMATION IS AN IMPORTANT PART OF THIS APPLICATION.

Hire Date _____ Start Date _____

LIST ALL YOUR PREVIOUS JOBS BEGINNING WITH YOUR LAST JOB • ACCOUNT FOR PERIODS OF UNEMPLOYMENT GREATER THAN 30 DAYS
IF YOU HAVE HAD MORE THAN FOUR FULL-TIME JOBS, LIST ADDITIONAL JOBS ON AN ATTACHED PAGE

Firm Name _____
Address _____
City _____ State _____ Zip _____ Phone _____
Employed From _____ to _____ Reason for Leaving _____
Type of Work _____
Supervisor's Name _____ Rate of Pay (Monthly) _____
Did you have a period of unemployment? Yes No Dates: From _____ to _____
Explain _____
REFERENCE CHECK
Person Contacted _____ Date _____ Results _____

Firm Name _____
Address _____
City _____ State _____ Zip _____ Phone _____
Employed From _____ to _____ Reason for Leaving _____
Type of Work _____
Supervisor's Name _____ Rate of Pay (Monthly) _____
Did you have a period of unemployment? Yes No Dates: From _____ to _____
Explain _____
REFERENCE CHECK
Person Contacted _____ Date _____ Results _____

Firm Name _____
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REFERENCE CHECK
Person Contacted _____ Date _____ Results _____

Firm Name _____
Address _____
City _____ State _____ Zip _____ Phone _____
Employed From _____ to _____ Reason for Leaving _____
Type of Work _____
Supervisor's Name _____ Rate of Pay (Monthly) _____
Did you have a period of unemployment? Yes No Dates: From _____ to _____
Explain _____
REFERENCE CHECK
Person Contacted _____ Date _____ Results _____

PLEASE READ CAREFULLY

I am applying for employment with Nellis Cab with the express understanding that if I am offered employment, my employment shall be for no definite duration and shall be at the will of either myself or my employer and that I may quit at any time or my employer may discharge me at any time for any reason.

I certify that the information contained in this application is correct to the best of my knowledge. I understand that falsification of this information or material omission is grounds for termination of my employment whenever discovered.

I understand that Nellis Cab is relying upon all the representations, both written and oral, which I have made or do make during the entire process of applying for employment with Nellis Cab I acknowledge that Nellis Cab has the right to investigate the accuracy of any representation that I make or have made to investigate any other information that Nellis Cab believes is relevant including, but not limited to, employment history, medical history, credit history, and arrest and conviction records. I hereby release and agree to hold Nellis Cab, its officers and agents harmless from any and all liability resulting in any way from such investigation and from any and all attorney's fees resulting from any such investigation and from any legal action I may institute which is within the scope of this waiver.

I hereby give my consent to the release of any and all information regarding my character, reputation for honesty, habits, ability, education, experiences, records of conviction, financial responsibility, reasons for leaving employment and any other matter relevant to my application for employment at Nellis Cab Further, I hereby release and agree to hold harmless anyone who may furnish such information to Nellis Cab from any and all liability resulting in any way from the provision of such information and from any and all attorney's fees resulting from any legal action I may institute which is within the scope of this waiver.

If, while employed, my behavior should raise any questions about my ability to satisfactorily perform my job responsibilities, I may be required to be tested for the presence of alcohol, illegal drugs, and controlled substances if the company has reason to believe I am violating the company's policy regarding the use of such substances.

If, while employed, management at any time requests a search of my person, my personal property, the company vehicle I am driving, I agree to submit and waive all claims for damages in connection with such an examination.

Signature _____ Date _____