

DRIVER/ OPERATOR APPLICATION

Please fill out the following information completely and accurately, then sign it. Any incomplete or unsigned application will not be considered.

Name _____ Social Sec. No _____ - _____ - _____

Address _____ City _____ Zip _____

Phone _____ Do you have an answering machine _____

Pager _____ Cell Phone _____

Drivers License No. _____ State _____

Do you have a CDL _____ No. of accidents in past 3 years _____

No of tickets in past 3 years _____ Is your license current and active? _____

Name of Insurance Co, agent and Policy number _____

Are you covered by Worker's Comp while plowing? _____

Are you willing to take a drug test prior to being hired _____

Are you willing to shovel? _____ Do you own a salt spreader? _____
Type and capacity of salt spreader? _____

Do you have any of your own accounts that you intend to plow this winter? _____

If so what is your obligation to them? _____

Do you have any physical handicaps that may interfere with your ability to perform the position
you are applying for _____

Do you intend to plow for another contractor besides Snow Pros this winter? _____ If so,
who? _____

Do you prefer to work solo or with another truck? _____

Do you prefer lots of little jobs or fewer big jobs? _____

What time do you usually go to sleep? _____ Wake up? _____

How many hours of sleep you average per night? _____

What is the minimum number of hours of sleep do you need in a night? _____

How many times in the past 3 years have you gone a night without sleep? _____

What is the most number of hours you have stayed awake in the past 3 years? _____

Describe the circumstances _____

What is the highest grade of education you have completed? _____

Were you ever fired or forced to resign from a job? _____

Have you ever been convicted of a felony or misdemeanor? _____

Current Employer _____ Address _____

Name of Boss _____ Phone _____

Start Date _____ No. of days missed _____

Will you collect unemployment or Worker's Comp this winter? _____

Describe your snow plowing experience: _____

Make and Model of truck _____ No of miles _____

Length and type of blade _____

Describe your mechanical experience with cars, trucks, snow plows and snow blowers:

How many hours each snow fall do you want to work? _____

Are you willing to work overnight, weekends and holidays? _____

I hereby swear that all the information on this application is true and correct. I understand that any misrepresentation is cause for immediate dismissal. My signature below authorizes Snow & Ice Pros, Inc. to verify all information provided and authorizes third parties to release information. I agree to obey all company rules, regulations and policies and to return to them anything belonging to them when I leave, otherwise they may be deducted from my final paycheck.

Signature

Date