

**MONTANA LINES, INC. APPLICATION FOR EMPLOYMENT**  
**PLEASE READ ENTIRE APPLICATION PROCESS BEFORE FILLING OUT**  
 EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION - REQUIRED												
<b>JOB APPLYING FOR</b>		<input type="checkbox"/> Construction Crew <input type="checkbox"/> Flagger <input type="checkbox"/> Other: _____										
<b>FIRST</b>				<b>MI</b>				<b>LAST</b>				
<b>PHONE</b>	(	)				<b>EMAIL</b>						
<b>ADDRESS</b>							<b>CITY</b>			<b>ST</b>	<b>ZIP</b>	
MAILING (IF DIFFERENT)					<b>CITY</b>			<b>ST</b>			<b>ZIP</b>	
EMPLOYMENT HISTORY												
Provide information on all employers for the last 3 years.												
<b>MOST RECENT EMPLOYER</b>						<b>FROM</b>		<b>TO</b>				
						Mo. / Yr.		Mo. / Yr.				
<b>ADDRESS</b>					<b>CITY</b>			<b>ST</b>			<b>ZIP</b>	
<b>CONTACT PERSON</b>						<b>POSITION HELD</b>						
<b>SALARY/WAGE</b>						<b>REASON FOR LEAVING</b>						
<b>2<sup>ND</sup> TO LAST EMPLOYER</b>						<b>FROM</b>		<b>TO</b>				
						Mo. / Yr.		Mo. / Yr.				
<b>ADDRESS</b>					<b>CITY</b>			<b>ST</b>			<b>ZIP</b>	
<b>CONTACT PERSON</b>						<b>POSITION HELD</b>						
<b>SALARY/WAGE</b>						<b>REASON FOR LEAVING</b>						
<b>3<sup>RD</sup> TO LAST EMPLOYER</b>						<b>FROM</b>		<b>TO</b>				
						Mo. / Yr.		Mo. / Yr.				
<b>ADDRESS</b>					<b>CITY</b>			<b>ST</b>			<b>ZIP</b>	
<b>CONTACT PERSON</b>						<b>POSITION HELD</b>						
<b>SALARY/WAGE</b>						<b>REASON FOR LEAVING</b>						
<b>EXPLAIN ANY GAPS IN EMPLOYMENT</b>												
EDUCATION												
<b>HIGH SCHOOL</b>						<b>GRADUATED</b>						
<b>SPECIALTY SCHOOL/TRADE SCHOOL/OTHER</b>												
<b>DEGREE</b>						<b>CERTIFICATES</b>						
<b>SPECIALTY SCHOOL/TRADE SCHOOL/OTHER</b>												
<b>DEGREE</b>						<b>CERTIFICATES</b>						
<b>COLLEGE</b>						<b>DEGREE</b>						
<b>OTHER ACCOMPLISHMENTS/INFORMATION</b>												
<b>OTHER CERTIFICATES</b>												
EMERGENCY NOTIFICATION INFORMATION												
<b>FIRST</b>				<b>MI</b>				<b>LAST</b>				<b>RELATIONSHIP</b>
<b>ADDRESS</b>						<b>CITY</b>		<b>ST</b>		<b>ZIP</b>		
<b>DAY PHONE</b>						<b>EVENING PHONE</b>						

APPLICANTS **MUST** COMPLETE ALL 3 PAGES OF THIS FORM

DRIVING/MISCELLANEOUS INFORMATION				
QUALIFICATIONS AND EXPERIENCE AS A DRIVER				
DRIVER LICENSE TYPE	STATE	LICENSE NUMBER	EXPIRATION DATE	
ACCIDENT RECORD FOR PAST 3 YEARS OR MORE (ATTACH SHEET IF MORE SPACE IS NEEDED)				
DATE	NATURE OF ACCIDENT (HEAD ON, REAR END, SINGLE VEHICLE, ETC.)	FATALITIES	INJURIES	
TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS (OTHER THAN PARKING VIOLATIONS)				
DATE	LOCATON	CHARGE	PENALTY	
<b>Have you ever been denied a license, permit or privilege to operate a motor vehicle?</b>		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>Has any license, permit or privilege ever been suspended or revoked?</b>		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>If the answer to either question was yes, attach a statement with details</b>				
<b>Have you ever been convicted of a felony?</b>		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>If "Yes" please explain</b>
TYPE OF COMMERCIAL VEHICLE	TYPE OF EQUIPMENT (Van, Tank, Flat, Etc.)	START DATE	END DATE	APPROX # OF MILES (TOTAL)
STRAIGHT TRUCK				
TRACTOR/SEMI-TRAILER				
OTHER: _____				
<b>List ALL States operated in for the past five years</b>				
<b>Special courses or training that help you as a driver</b>				
<b>Extra Comments or Explanation</b>				

PLEASE SEE INSTRUCTIONS ON NEXT PAGE

Thank you for your interest in Montana Lines, Inc.

The survey (directions below) is a screening tool that helps us to assess whether or not you will be a good fit for Montana Lines. By signing the application, you are agreeing to keep the contents of the survey confidential.

**Both the application and survey must be received in order for your employment to be considered.** If you need assistance to complete either, please contact us so that we can help you make other arrangements. If unable to “submit application” with button, please save and email to address below.

The hiring process can take some time, as we get numerous applications for each position. We give each application personal consideration and, therefore, are unable to make hiring or interviewing decisions instantly. We will not discuss our hiring decisions with applicants.

If after reviewing your information we feel you are a potential fit for Montana Lines, you will be called to arrange an interview.

Sincerely,  
Becky McCord  
Human Resources  
**Email: [Career@mtlines.com](mailto:Career@mtlines.com)**

R:Jodie:Blank Forms:EP:MTL APPLICATION 7-13-17

I certify this application was completed by me and all entries and information are true and complete. I have read, understand and agree to cooperate with the above mentioned process. I understand that the information I provide about myself on application forms, surveys, tests and during interviews will be used in making hiring decisions, and I consent to it being used for this purpose.

<b>Applicant's Signature</b>		<b>Date</b>	
------------------------------	--	-------------	--

**SURVEY MUST ALSO BE COMPLETED FOR EMPLOYMENT CONSIDERATION**

- 1. Write down this Username to access Survey: 078300017u**
2. Click on the “Submit Application” button, should direct you to website. If it doesn't work, save and email your application, then click on this link or open your Internet browser and copy the link into the web address:  
<https://mitapplicant.merchantsinfo.com>
3. When you are finished, you will be thanked and advised that your survey has been sent.

If you are having trouble saving your application, please email [Career@mtlines.com](mailto:Career@mtlines.com) and an application will be emailed to you as an attachment.

The APPLICATION and SURVEY must **BOTH** be received for consideration for employment.