



BST Logistics LLC

Job Application

Personal Information

First Name _____ Last Name _____ MI _____

Street Address _____

City, State, Zip _____

SSN # _____ DL # _____

Email _____ Phone _____

Are you 18 or older? Yes No DOB _____ Legal US Citizen? Yes No

Position Applying For? _____ Expected Pay _____ Date Available To Start? _____

Have you been convicted of a felony in the last 10 years? Yes No Are you willing to work weekends? Yes No

If yes explain _____

Are you willing to work Holidays? Yes No

Prior Work History

Most recent Employer? _____ Starting Pay _____

Street Address _____ Ending Pay _____

City, State, Zip _____ Start Date _____

Position held _____ End Date _____

Supervisor Name _____ Supervisor Phone _____

Reason for leaving? _____

Prior employer? _____ Starting Pay _____

Street Address _____ Ending Pay _____

City, State, Zip _____ Start Date _____

Position held _____ End Date _____

Supervisor Name _____ Supervisor Phone _____

Reason for leaving? _____

Prior employer? _____ Starting Pay _____
 Street Address _____ Ending Pay _____
 City, State, Zip _____ Start Date _____
 Position held _____ End Date _____
 Supervisor Name _____ Supervisor Phone _____
 Reason for leaving? _____

Education

High School Graduate? Yes No If no, last grade completed 8 9 10 11 12 GED? Yes No
 School Name _____ Years attended From _____ To _____
 School Address _____

College Graduate? Yes No If yes, number of years? 2 yr 3 yr 4 yr 5 yrs + Major _____
 University Name _____ Years attended From _____ To _____
 University Address _____

Trade School Graduate? Yes No If yes, school Name? _____ Trade _____
 Number of years Attended? 8 9 10 11 12 School Address? _____

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|---|--|
| List any applicable special skills, training or proficiencies - especially trucking related skills. | |
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|--|--|
| Why do you believe you would be an effective dispatcher? | |
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| | |
| | |

Personal References

Name _____ Phone _____
 Address _____ May we contact this person? Yes No
 City, State, Zip _____ Relationship to this person _____

Name _____
Address _____
Citty, State, Zip _____

Phone _____
May we contact this person? Yes No
Relationship to this person _____

Name _____
Address _____
Citty, State, Zip _____

Phone _____
May we contact this person? Yes No
Relationship to this person _____

Equipment

Desktop Computer Yes No Computer Brand _____ How many monitors? _____
Laptop Computer Yes No Computer Brand _____ Printer Yes No
Desk & Office Space to do work? Yes No Do you have Adobe Acrobat - or other PDF editor? Yes No

Disclaimer - by signing, I hereby certify that the above information, to the best of my knowledge, is true, I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired.

Signature _____
Date _____

FOR OFFICE USE ONLY - Do not write in this section

| | | |
|--------------------------------|-------------------|--------------------|
| Application reviewed by: _____ | Review date _____ | Time _____ |
| Initial thoughts _____ | | |
| Hire or Deny _____ | Start Date _____ | Starting Pay _____ |
| | Ending Pay _____ | End Date _____ |
| Fired or Quit _____ | Reason _____ | |

Please fill this application out completely and email to:

john@bstlogistics.solutions