



2455 Doolittle Drive
Holts Summit, MO 65043
(800) 654-4948 Fax: (573) 896-8123

Doolittle Trailer Manufacturing, Inc. will consider all applicants without regard to race, creed, color, sex, national origin, religion, handicap or veteran status.

There is no right or wrong answers to the questions in Section I. Applicants will not be denied consideration for employment due to any one question. This information will be utilized to evaluate your work ethics and overall suitability to our work environment.

The questions in Section II of this questionnaire will be utilized to evaluate you for proper job placement within our organization. This will also aid us in determining the starting salary you may be offered.

There is no time limit for the questionnaire. Please answer all the questions honestly and to the best of your ability.

NAME: _____

DATE: _____

OFFICE USE ONLY

PREVIOUS EMPLOYEE: _____ IF YES CHECK W/ HR _____

REFERENCE CALLED: _____

TEST SCORE: _____

BACKGROUND: _____

DEPARTMENT: _____

INTERVIEWED BY: _____

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE _____ PHONE NUMBER (_____) _____ - _____

NAME

FIRST MIDDLE LAST
ADDRESS

STREET CITY STATE ZIPCODE

SOCIAL SECURITY NUMBER 18 OLDER? ___ YES ___ NO DATE OF BIRTH

EMPLOYMENT DESIRED

POSITION DESIRED DATE YOU CAN START HOURLY RATE DESIRED

EDUCATION

Email _____

HIGHEST GRADE COMPLETED (CIRCLE ONE) 8 12 GED COLLEGE

TRADE, BUSINESS OR TECHNICAL SCHOOL _____
NAME AND LOCATION OF SCHOOL

PREVIOUS EMPLOYMENT (LIST LAST 3 EMPLOYERS, STARTING WITH THE MOST RECENT)

NAME/ADDRESS OF EMPLOYER	CITY/STATE	PHONE	HOW LONG	SALARY	POSITION	REASON FOR LEAVING

REFERENCES

GIVE THE NAMES OF 2 PERSONS WITH WHOM YOU ARE NOT RELATED, THAT YOU WOULD LIKE TO LIST

NAME TELEPHONE NUMBER ADDRESS

NAME TELEPHONE NUMBER ADDRESS

ADDITIONAL QUESTIONS

ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES ON A FULL-TIME OR PERMANENT BASIS?
___ YES ___ NO

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? (Conviction will not disqualify you from employment unless there is a direct relationship to the job or your employment would pose an unreasonable risk to property or safety) ___ YES ___ NO
If so please list: _____

HAVE YOU EVER HAD ANY MAJOR INJURIES OR HEALTH PROBLEMS? ___ YES ___ NO
Please Explain: _____

IN CASE OF EMERGENCY NOTIFY

NAME ADDRESS TELEPHONE

EMPLOYMENT QUESTIONNAIRE
SECTION I

Please answer the following questions. If you need additional paper please attach to the last page.

1. Do you currently have a valid Missouri driver's license? _____
2. Do you have your own transportation to and from work? _____
3. Do you have any judgments, or pending judgments against you, which may require a payroll deduction, or cause wage garnishments? _____
4. Are you currently a member of the Armed Forces? _____ If yes, what is your status?

5. Have you ever been arrested for a felony? _____
6. In your opinion, why do you feel that your application for employment should be considered over that of another?

7. Are you able to bend, stoop, kneel, climb, and pick up and carry 50 pounds? _____

8. What professional traits do you have to offer this company? _____

9. What do you expect from your employer? _____

10. What do you think your employer should expect from you? _____

11. What personal traits do you possess that you feel are an asset to yourself, and a prospective employer?

12. What are your hobbies and personal interests? _____

13. If you witness a fellow employee stealing from the company, what would you do? _____

14. Of your previous job positions, which did you like the most and why? _____

15. Of your previous job positions, which did you like the least and why? _____

16. How often do you think it is acceptable to miss work for personal reasons? _____

17. How many days per year on the average, do you miss work for personal or family sickness? _____

18. If it became necessary to work overtime, how many hours per week would you be willing to work?

19. In dollar and cents terms, how much do you feel you are worth? _____
Please explain your answer. _____

20. Where did you hear about Doolittle Trailer Mfg., Inc.? _____
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**EMPLOYMENT QUESTIONNAIRE
SECTION II**

1. What purpose do lug nuts serve? _____

2. Define G. V. W. _____

3. What is a chuck used for in reference to an electric drill? _____

4. What is a pneumatic tool? Please give an example. _____

5. What is the third prong on an electric cord used for? _____

6. Define a 5 on 4 ½ bolt pattern, in reference to a wheel? _____

7. What does P 215/75R/15 stand for in reference to a tubeless tire? _____

8. What is the difference between duals and tandems? _____

9. What is the difference between radial and bias ply tires? _____

10. What is a surge brake? _____

11. In trailer terms, what is a gooseneck and what is a 5th wheel? _____

12. If you cut in half a board measuring 93 3/4" long, what would both halves measure? _____

13. On a tape measure which has 15 marks between the inch markers, what would the second mark be?

14. On a tape measure which has 15 markers between the inch markers, what would the 14th mark be?

15. $1/8 + 3/16 =$ _____ 16. $7/16 - 1/8 =$ _____ 17. $1/4 + 1/4 =$ _____

18. $3\ 3/4 + 91\ 1/2 =$ _____ 19. $1/2 - 1/16 =$ _____

20. What is a velocity cup used for in reference to painting equipment? _____

21. What is the minimum and maximum air pressure setting for an airless paint system? _____

22. When operating paint equipment, what purpose does a respirator serve? _____

23. Define porosity, in reference to mig welding? _____

24. What causes porosity? _____

25. Define weaving. _____

26. Define a stitch weld. _____

Using the list below, which piece or pieces of personal protective equipment would you use for the specific job task listed?

- | | |
|---|----------------------|
| 27. Welding _____ | A.) Hard Hat |
| 28. Operating a table saw _____ | B.) Safety Glasses |
| 29. Painting _____ | C.) Welding Helmet |
| 30. Manual Labor _____ | D.) Gloves |
| 31. Operating hand power tools _____ | E.) S.C.B.A. |
| 32. Operating hand overhead wench _____ | F.) Respirator |
| 33. Operating electrical grinder _____ | G.) Push Stick |
| | H.) Fume Respirator |
| | I.) Back Support |
| | J.) Ear Plugs |
| | K.) Goggle |
| | L.) Face Shield |
| | M.) Safety toe boots |
| | N.) All of the above |

If asked to do so as a condition of your employment, would you permit the company to run a criminal background check, to include present wants and warrants? _____

Signature _____ Date _____

FOR OFFICE USES ONLY		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Department	Hire Date	Rate
<input type="text"/>		
Hired By		
<input type="text"/>		
Additional Notes		