



Your SOURCE for one-stop logistic solutions

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EMPLOYMENT APPLICATION

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

PERSONAL INFORMATION:

Name: First _____ Middle _____ Last _____

Street Address _____

City, State, Zip Code _____

Phone Number (_____) _____ Cell Number (_____) _____

Social Security No. ____-____-_____

Are you eligible to work in the United States?

Yes _____ No _____

Have you been convicted of a felony?

Yes _____ No _____

If yes, please explain: _____

POSITION/AVAILABILITY:

Position Applied For

What date are you available to start work? _____

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PLEASE SUBMIT THIS FORM WITH YOUR COVER LETTER & RESUME