

TMM USA, Inc.
521 Page Drive
Franklin, KY 42134

Application for Employment

INSTRUCTIONS: Please read the entire application before you answer any questions. Print all information in blue or black ink and answer all questions accurately and completely. **PRINT "N/A"** in any space that does not apply to you. All applicants receive consideration for the position for which they apply. This application is current for only sixty (60) days. At the conclusion of this time, if you have not heard from TMM USA, Inc. and still wish to be considered for employment, it will be necessary for you to complete a new application. **Incomplete applications will not be considered.**

Applicant Information

Position Applied For: _____ Date: _____

Full Name: _____ Social Security Number: _____

Address: _____
Street Address City State Zip Code

Primary Phone: _____ Alternate Phone: _____ Email: _____

Are you over the age of 18? Yes No

Note: If under 18 years of age, employment is subject to verification of minimum legal age certification or work permit.

Are you authorized to work in the U.S.A. on a full-time basis for: all employers or your current employer only?

Can you submit legal verification of your authorization to work in the U.S.A.? Yes No

Have you completed an employment application with TMM in the last 12 months? Yes No If yes, when? _____

Have you even been employed by TMM USA, Inc.? Yes No

If yes, when and what department? _____

What was your reason for leaving? _____

Do you want to work: Full Time Part Time Temporary

What days and hours of the week are you available to work? _____

Are you willing to work overtime as necessary? Yes No

Date you are available to start: _____

If the position you are applying for requires driving a company vehicle, complete the following:

Operator's License No. _____ Commercial License No. _____

Have you been convicted of a felony? Yes No If yes, explain and give the case(s) and disposition if applicable:

A felony conviction will not necessarily disqualify you from the job for which you are applying. Each conviction will be judged on its own merits with respect to the time and job relatedness and only to the extent permitted by applicable law.

Do you have a High School Diploma or GED? Yes No

Do you have any immediate family members employed by TMM USA, Inc. (parent/ spouse/ sibling/ child)? If yes, state name and relationship: _____

Education

Education	Name of School and City, State	Graduated		Years Completed	Major
		Yes	No		
High School					
GED or Other					
College/University					
College/University					
Trade, Business or Correspondence School					

Academic Achievements and Activities

Please list academic honors, scholarships or fellowships, memberships in academic honorary societies; or participation in or offices held in extracurricular activities you consider significant. (Exclude those that identify race, color, religion, national origin, age):

Skills & Qualifications

Other qualifications such as special skills, abilities or honors that should be considered:

Types of computers, software, and other equipment you are qualified to operate or repair:

Professional licenses, certifications or registrations:

Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to note:

Military

Have you ever served in the U.S. Armed Forces? Yes No

If Yes, list your dates of service and duties performed, including special training that is relevant to the position for which you have applied.

Are you currently active in the National Guard or Reserves? Yes No

References

List three personal references who are not relatives.

Name Telephone Relationship Years Known

Name Telephone Relationship Years Known

Name Telephone Relationship Years Known

Employment History

Starting with your **PRESENT** or **MOST RECENT EMPLOYER**, list in consecutive order **ALL EMPLOYMENT** for at least the last **TEN years** (if applicable). Include an additional sheet if more space is needed. Account for all gaps in employment history.

If currently employed, may we contact your employer? Yes No

Employer name:		Salary	Employed (MM/YY)
Address:		Begin:	From:
Supervisor:	Telephone:	End:	To:
Position Title:		Average hours/week:	
List jobs held, duties performed and promotions while employed at this company:		Reason for Leaving:	
Employer name:		Salary	Employed (MM/YY)
Address:		Begin:	From:
Supervisor:	Telephone:	End:	To:
Position Title:		Average hours/week:	
List jobs held, duties performed and promotions while employed at this company:		Reason for Leaving:	
Employer name:		Salary	Employed (MM/YY)
Address:		Begin:	From:
Supervisor:	Telephone:	End:	To:
Position Title:		Average hours/week:	
List jobs held, duties performed and promotions while employed at this company:		Reason for Leaving:	
Employer name:		Salary	Employed (MM/YY)
Address:		Begin:	From:
Supervisor:	Telephone:	End:	To:
Position Title:		Average hours/week:	
List jobs held, duties performed and promotions while employed at this company:		Reason for Leaving:	

Statement of Understanding, Agreement and Certification

PLEASE READ CAREFULLY, INITIAL THE BLANK BESIDE EACH STATEMENT THEN SIGN BELOW.

_____ 1. I certify that all the information provided herein is true and complete to the best of my knowledge. I understand and agree that this application must be complete, signed and dated before TMM USA, Inc. will consider me for employment. Any misrepresentation or omission of any fact in my application, resume or any other materials or information provided during any interviews, can be justification for refusal of employment, or, if hired, termination from employment.

_____ 2. Any offer of employment I may receive from TMM USA, Inc. is contingent upon my successful completion of the company's pre-employment screening process, which may include the company's receipt of references it considers satisfactory. I authorize and request that all of my present and former employers and those individuals I have listed as personal references furnish information about my employment record including a statement of the reason for the termination of my employment, work performance, abilities and other qualities pertinent to my qualifications for employment. In consideration of TMM USA, Inc.'s review of this application, I release TMM USA, Inc., its agents, all former employers, educational institutions and persons from any and all liability as a result of furnishing this reference information. I further authorize TMM USA, Inc. to disseminate this information to any person or entity.

_____ 3. I understand that as a condition of employment, I will be required to undergo and satisfactorily complete any post-offer pre-employment activities that TMM USA, Inc. may require, at the company's expense, including a medical examination and/ or screening for alcohol and/ or drugs. I also agree, if employed, I may be required to submit to a medical examination and/ or screening for alcohol and/ or drugs at any time, at the discretion of TMM USA, Inc. I further understand and agree that the satisfactory completion of any post-offer pre-employment or post-employment medical examination and/ or screening for alcohol and/ or drugs does not guarantee initial or continued employment. I hereby consent to having the results of any post-offer pre-employment or post-employment medical exams and/ or screening for alcohol and/ or drugs I may be required to take be disclosed to TMM USA, Inc.. Failure to sign the necessary consent forms will be deemed a withdrawal of my application for employment.

_____ 4. In processing my application for employment, TMM USA, Inc. may verify all the information provided by me, or may procure or have prepared a consumer or an investigative consumer report for this purpose concerning my prior employment, military record, education, character, general education, personal characteristics, and criminal record. I understand that upon written request to TMM USA, Inc., I will be informed whether an investigative consumer report was requested and given full information as to the nature and scope of this investigation. In addition, the Immigration Reform and Control Act (IRCA) requires that, after hire, an employer verify the legal work authorization and identity of all employees. An offer of employment will depend upon TMM USA, Inc.'s ability to verify this necessary information.

_____ 5. In consideration of my employment, I understand and agree as follows: 1. I will follow all TMM USA, Inc. policies, rules, regulations and procedures; 2. My employment is on an at-will basis, is not for any fixed term, and can be curtailed or terminated with or without cause or notice by myself or by TMM USA, Inc., at any time, for any reason not contrary to law; 3. I will work whatever days, hours and overtime as TMM USA, Inc. requests; and 4. My hours and days of work are not guaranteed but are set, and may be changed at any time and from time to time, by TMM USA, Inc. I further understand that no manager or representative of TMM USA, Inc., other than the President, has any authority to enter into any agreement with me for employment for any specified period of time or to make any agreement different from or contrary to the foregoing. I further understand that any such agreement, if made, shall not be enforceable unless it is in writing and signed by me and the President of TMM USA, Inc.

_____ 6. TMM USA, Inc. is an equal opportunity employer. TMM USA, Inc. considers all applicants for employment without regard to race, color, religion, sex, national origin, age, handicap or disability, or status as a Vietnam-era or special disabled veteran in accordance with federal law. TMM USA, Inc. complies with applicable state and local laws prohibiting discrimination in employment in every jurisdiction in which it maintains facilities. TMM USA, Inc. also provides "reasonable accommodations" to qualified individuals with disabilities, in accordance with the Americans with Disabilities Act and applicable state and local laws. I understand that if I am physically or mentally incapable of performing the job for which I am applying and TMM USA, Inc. cannot reasonably accommodate my limitations, my application may be rejected, or I may be dismissed from employment at any time.

_____ 7. I understand that this application is current for only sixty (60) days. At the conclusion of this time, if I have not heard from TMM USA, Inc. and still wish to be considered for employment, it will be necessary for me to fill out a new application.

_____ 8. Limitation on Claims: I AGREE THAT ANY ACTION OR SUIT AGAINST TMM USA, INC. ARISING OUT OF MY EMPLOYMENT OR TERMINATION OF EMPLOYMENT, INCLUDING BUT NOT LIMITED TO CLAIMS ARISING UNDER THE STATE OR FEDERAL CIVIL RIGHTS STATUTES, MUST BE BROUGHT WITHIN ONE YEAR OF THE EVENT GIVING RISE TO THE CLAIM OR BE FOREVER BARRED. I WAIVE ANY STATUTE OF LIMITATIONS TO THE CONTRARY.

By initialing the blanks beside each statement above and by signing below, I certify that I have read, understand and agree with all the statements above. None of the provisions may be waived or modified by TMM USA, Inc. unless in writing and signed by the President of TMM USA, Inc..

Print Name: _____

Date: _____

Applicant Signature: _____