

LAST NAME		FIRST NAME		MIDDLE NAME OR INITIAL	
STREET ADDRESS		CITY		STATE	ZIP CODE
PHONE		EMAIL			
DRIVER'S LICENSE #	STATE	CDL - CLASS	CDL EXPIRATION DATE		

WORK EXPERIENCE - LIST PRIOR WORK EXPERIENCES BEGINNING WITH THE MOST RECENT

EMPLOYER NAME			EMPLOYER PHONE #		
EMPLOYER ADDRESS		CITY		STATE	ZIP CODE
EMPLOYMENT DATES: FROM MO/YR TO MO/YR			REASON FOR LEAVING		

EMPLOYER NAME			EMPLOYER PHONE #		
EMPLOYER ADDRESS		CITY		STATE	ZIP CODE
EMPLOYMENT DATES: FROM MO/YR TO MO/YR			REASON FOR LEAVING		

EMPLOYER NAME			EMPLOYER PHONE #		
EMPLOYER ADDRESS		CITY		STATE	ZIP CODE
EMPLOYMENT DATES: FROM MO/YR TO MO/YR			REASON FOR LEAVING		

EMPLOYER NAME			EMPLOYER PHONE #		
EMPLOYER ADDRESS		CITY		STATE	ZIP CODE
EMPLOYMENT DATES: FROM MO/YR TO MO/YR			REASON FOR LEAVING		

LIST ANY SPECIAL SKILLS OR QUALIFICATIONS RELATIVE TO THE JOB FOR WHICH YOU ARE APPLYING:

REFERENCES: LIST 2 PEOPLE WHO ARE NOT RELATED TO YOU AND HAVE KNOWLEDGE OF YOUR QUALIFICATIONS AND EXPERIENCE FOR THE POSITION YOU ARE APPLYING:

REFERENCE NAME		REFERENCE PHONE #	
REFERENCE ADDRESS	CITY	STATE	ZIP CODE

REFERENCE NAME		REFERENCE PHONE #	
REFERENCE ADDRESS	CITY	STATE	ZIP CODE

I HEREBY UNDERSTAND AND ACKNOWLEDGE THAT UNLESS OTHERWISE DEFINED BY APPLICABLE LAW, ANY EMPLOYMENT RELATIONSHIP WITH HUM'S HARDWARE & RENTAL IS OF AN AT WILL NATURE. THIS MEANS THAT THE EMPLOYER MAY DISCHARGE THE EMPLOYEE AT ANY TIME WITH OR WITHOUT CAUSE AND THE EMPLOYEE MAY RESIGN AT ANY TIME. IT IS FURTHER UNDERSTOOD THAT THIS AT WILL EMPLOYMENT RELATIONSHIP MAY NOT BE CHANGED BY ANY WRITTEN DOCUMENT OR BY CONDUCT UNLESS SUCH CHANGE IS SPECIFICALLY ACKNOWLEDGED IN WRITING BY AN AUTHORIZED EXECUTIVE OF THIS ORGANIZATION.

CERTIFICATION

IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW MAY RESULT IN AN IMMEDIATE DISCHARGE. I UNDERSTAND ALSO THAT I AM REQUIRED TO ABIDE BY ALL RULES AND REGULATIONS OF THE EMPLOYER.

I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE:

SIGNATURE	DATE
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BACKGROUND CHECK PERMISSION FOR PROSPECTIVE EMPLOYEE

AS A CONDITION OF CONSIDERATION OF MY EMPLOYMENT APPLICATION, I GIVE PERMISSION TO HUM'S HARDWARE & RENTAL TO INVESTIGATE MY PERSONAL AND EMPLOYMENT HISTORY. I UNDERSTAND THAT THIS BACKGROUND INVESTIGATION WILL INCLUDE, BUT NOT BE LIMITED TO, VERIFICATION OF ALL INFORMATION ON MY EMPLOYMENT APPLICATION. I SPECIFICALLY GIVE PERMISSION TO HUM'S HARDWARE & RENTAL TO CONTACT ALL OF MY PRIOR EMPLOYERS FOR REFERENCES. I FURTHER GIVE PERMISSION TO ALL CURRENT OR PREVIOUS EMPLOYERS AND/OR MANAGERS OR SUPERVISORS TO DISCUSS MY RELEVANT PERSONAL AND EMPLOYMENT HISTORY WITH HUM'S HARDWARE & RENTAL AND CONSENT TO THE RELEASE OF SUCH INFORMATION ORALLY OR IN WRITING, AND HEREBY RELEASE THEM FROM ALL LIABILITY AND AGREE NOT TO SUE THEM FOR DEFAMATION OR OTHER CLAIMS BASED UPON ANY STATEMENTS THEY MAKE TO ANY REPRESENTATIVE OF HUM'S. I FURTHER WAIVE ALL RIGHTS I MAY HAVE UNDER LAW TO RECEIVE A COPY OF ANY WRITTEN STATEMENT PROVIDED BY ANY OF MY FORMER EMPLOYERS TO HUM'S. I FURTHER AGREE TO INDEMNIFY ALL PAST EMPLOYERS FOR ANY LIABILITY THEY MAY INCUR BECAUSE OF THEIR RELIANCE UPON THIS AGREEMENT.

SIGNATURE	DATE
PRINT NAME	



STATE OF ARKANSAS
**Department of Finance
And Administration**

DRIVER SERVICES
Driving Records
Ragland Building, Room 1130
Post Office Box 1272
Little Rock, Arkansas 72203
Phone: (501) 682-7207
Fax: (501) 682-2075
<http://www.state.ar.us/dfa>

ARKANSAS DRIVING RECORDS RELEASE FORM

I, _____ DO HEREBY AUTHORIZE

OFFICE OF DRIVER SERVICES TO RELEASE MY:

- INSURANCE RECORD - \$7.00
- COMMERCIAL RECORD - \$10.00

TO: _____
(NAME)

_____ 3901 EAST BROADWAY _____
(ADDRESS)

_____ NORTH LITTLE ROCK, AR 72114 _____
(CITY, STATE, ZIP)

THIS RELEASE SHALL REMAIN IN FULL FORCE AND EFFECT FOR THE NEXT FIVE (5) YEARS, UNLESS A FORMAL WITHDRAWAL IS FILED BY ME.

SIGNATURE _____

DATE OF BIRTH _____

ARKANSAS DRIVERS LICENSE # _____

CURRENT DATE _____

THIS FORM MUST BE FILLED OUT IN FULL FOR RECORDS TO BE PROCESSED.