LEON
— LOGISTICS LTD —

EMPLOYMENT APPLICATION

LAST NAME:	FIRST NAME:	MI	Today's Date
			Position Applying For:
Street Address:			
City	State	Zip Code	Preferred Start Date:
Phone:			Pay Desired:
Email:			Availability for Work (check any that you will accept):
Are you at least 18 years old? Yes No			Full-time Part-time Temp/Seasonal
Are you at least 25 years old? Yes No			
Are you legally eligible for employment in the U.S.A.? Yes No			Have you previously been employed at Leon Logistics LTD.? Yes No
(Proof will be required if hired)	# SSN		If yes, where and when:
			Reason for leaving:

REFERRAL SOURCE

EMPLOYEE REFERRAL	SCHOOL/COLLEGE	ADVERTISEMENT	WALK-IN-LOCATION	OTHER
Specify:	Specify:	Specify:	Specify:	Specify:

EDUCATION

NAME OF SCHOOL	GRADUATED
Undergraduate College:	Yes No
School/College	Yes No
Other (Specify):	Yes No

List any other spoken languages, special courses, office skills, typing speed, experiences or qualifications which you feel would have a bearing on the job you are applying for:

2101 West 74th Street Chicago, IL 60636 | 872) 267-7001 | Fax: (773) 434-7850

PREVIOUS EMPLOYMENT HISTORY	
List below all present and previous employment, beginning with your most recent. Please complete below even if information is available on your resume.	
1. COMPANY NAME:	**2. COMPANY NAME:**
STREET ADDRESS:	STREET ADDRESS:
CITY, STATE:	CITY, STATE:
ZIP:	ZIP:
PHONE:	PHONE:
FROM : TO :	FROM: TO:
RATE OF PAY:	RATE OF PAY:
POSITION(S) HELD:	POSITION(S) HELD:
DUTIES:	DUTIES:
REASON FOR LEAVING:	REASON FOR LEAVING:
NAME OF SUPERVISOR: TITLE	NAME OF SUPERVISOR: TITLE
3. COMPANY NAME:	**4. COMPANY NAME:**
STREET ADDRESS:	STREET ADDRESS:
CITY, STATE:	CITY, STATE:
ZIP:	ZIP:
PHONE:	PHONE:
FROM: TO:	FROM: TO:
RATE OF PAY:	RATE OF PAY:
POSITION(S) HELD:	POSITION(S) HELD:
DUTIES:	DUTIES:
REASON FOR LEAVING:	REASON FOR LEAVING:
NAME OF SUPERVISOR: TITLE	NAME OF SUPERVISOR: TITLE

MAY WE CONTACT THE EMPLOYERS LISTED ABOVE? YES NO

IF NOT, INDICATE WHICH ONE(S) YOU DO NOT WISH FOR US TO CONTACT AND WHY?

PLEASE ADD TWO PROFESSIONAL REFERENCES:

_____	_____	_____
(Name)	(Title)	(Phone)
_____	_____	_____
(Name)	(Title)	(Phone)

CONVICTION RECORD

Have you ever been convicted of a felony or misdemeanor, pled guilty or no contest, or received deferred adjudication of a felony? Yes No

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If yes, please explain:

Please note: do not include arrests or detentions that did not result in a conviction or a plea. Conviction will not necessarily disqualify an applicant from employment. Consideration will be given to the nature of the crime, the amount of time since the criminal conviction, your employment history, the relationship between the job being applied for and the offense, and any other circumstances or information that would pertain to your employment and the safe and efficient operation of the business. NOTE: Under Illinois, Delaware, and Maryland law, an applicant is not obligated to disclose sealed or expunged records of conviction or arrest.

APPLICANT STATEMENT AND SIGNATURE

I certify that all information I have provided in order to apply for and secure work with Leon Logistics LTD. is true, complete and correct. I understand that my information provided by me that is found to be false, incomplete or misrepresented in my respect will be sufficient cause to (I) cancel further consideration of this application, or (II) immediately discharge me from the employer's service, whenever it is discovered. I understand that if I am hired my employment shall be considered "at will" and may be terminated by this company at any time without liability for wages or salary except for such as may have been earned at the date of such termination unless or until superseded by specific written employment contract. I also understand that nothing in this application should be considered as an offer of employment by Leon Logistics LTD. I acknowledge that if I need reasonable accommodation in either the application process or employment, I should bring it to attention of Leon Logistics LTD. Confidential Material and Property of Leon Logistics LTD.

Signature _____ **Date** _____

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APPLICATION FOR EMPLOYMENT

Company Name: _____

Address: _____

City, State, Zip: _____

Name _____
(First) (Middle) (Last)

Current Address: _____
(Street) (City) (State, Zio How Long?

Previous Address (es): _____
(Street) (City) (State, Zio How Long?

_____
(Street) (City) (State, Zio How Long?

Phone #: ( ) **Date of Birth:** **Social Security #:**

Emergency Contact Name: _____ **Relation** _____

Contact Address: _____ **Phone #:** ( ) _____

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