

Mercury PDX Job Application

Dear Prospective Employee:

Thank you for taking the time to apply for a position with Mercury PDX, the top local same-day delivery company. There are many advantages to working for the fastest growing local trucking/delivery company in the region. Mercury PDX has been in business since February 2000 and we are looking forward to adding additional team members.

To be considered for a position with Mercury PDX, please completely fill out this application. The process will take 10-15 minutes. Incomplete information will delay the processing of your application. Once completed, please sign and date the application, save it to your computer, then email the saved file to employment@mercurypdx.com. Alternatively, you can fax it to MercuryPDX at **971-245-6969**, or mail to MercuryPDX, PO Box 2274, Portland, OR 97208.

We respectfully request that you do NOT phone or drop in our office regarding your employment status. If you have any questions please email them to: employment@mercurypdx.com.

			Personal Information					
Name:		Social Sec	urity #					
Address: City	:	State:	Zip code:					
Home Telephone #: Cell Phone #	#	Email						
Drivers License #: State	e Issuing:	Expiration	Date:					
I am applying for a job as:								
If your application is considered favorably, on	what date wi	II you be available for	work?					
What type of employment are you seeking?	Full	Part-Time						
Are you able to work overtime hours?	Yes	No						
Are you legally eligible for employment								
in the U.S.A.?	Yes	No						
Are you over the age of 21?	Yes	No						
From what time in the AM to what time in the PM are you able to work?								
Are you able to work holidays and weekends?	Yes	No						
Below this line on this page for driver applicant	ts only							
Please list any medial issues, health problems or prior work injuries that should be considered in job								
placement:								
The amount of weight that I can safely lift to m	ny waist is	lbs.						
Has your driver's license ever been suspended,	revoked or o	lenied? Yes	No					
Have you ever been stopped while intoxicated?	?	Yes	No					
How many moving violations or driving acciden	nts have you	had in the past 5 years	s?					
# Of driving tickets # of driving accide	ents							
Please list month and date for each:								



				Employment Histo
Most current employer:				
Address:				_ Telephone #:
Position held:			Employed from	until
Rate of pay: startinge	nding		_	
Reason for leaving:				
Supervisor's name and title:				
List the jobs you held, duties perfor	med, skill	s used o	or learned, advanceme	nts or promotions:
May we contact this employer?	Yes	No		
Name of next previous employer:				
Address:				
Position held:				until
Rate of pay: startinge	_			
Reason for leaving:				
Supervisor's name and title:				
List the jobs you held, duties perfor	med, skill	s used o	or learned, advanceme	nts or promotions:
May we contact this employer?	Yes	No		
Name of next previous employer:				
Address:				_ Telephone #:
Position held:				
Rate of pay: startinge	nding		_	
Reason for leaving:				
Supervisor's name and title:				
List the jobs you held, duties perfor	med, skill	s used o	or learned, advanceme	nts or promotions:
May we contact this employer?	Yes	No		



			Education/Skills
High School:		City: _	State:
Did you graduate? Yes No		-	
College:		City: _	State:
Did you graduate? Yes No Degree or cou	rse of st	udy:	
Do you possess any special drivers licenses? Yes	No	Please	list:
Can you drive a standard transmission?	Yes	No	
Do you have any fork lift experience?	Yes	No	If yes # of years:
Do you have any pallet jack experience?	Yes	No	If yes # of years:
Do you have any engine or mechanical skills?	Yes	No	
If yes please describe:			
How long have you been a Portland resident?		\	/rs
Please describe your knowledge of the Portland area:			
Please describe any additional skills or schooling that			
			Legal Info
I declare the information provided by me in this applic	cation is	true. coi	rrect, and complete to the best of my
knowledge. I understand that if employed, any falsific			•
with my application, whether on this document or not			
authorize you to verify any and all information provide	•		, ,
I acknowledge that employment may be conditional u	ipon suc	cessful c	ompletion of a substance abuse screening
test as part of the company's pre-employment policy.			
took as part of the company o pro ompreyment pensy.			
I acknowledge that if I become employed, I will be fre	ee to ter	minate n	ny employment at anytime for any reason
and that Mercury PDX retains the same rights. No Me			
contrary agreement.	· · · · · ·	- 15. 30	
SIGNATURE:			DATE:
PRINTED NAME:			