



ADRIAN & BLISSFIELD RAIL ROAD COMPANY P.O. Box 95 • Blissfield, MI 49228

APPLICANTS WILL BETESTED FOR ILLEGAL DRUGS.

		- 								
	ON FOR WHICH EAPPLYING:									
Check a	all that you may be	e interested in:	Full-Ti	ne 🗆	Part-Time □					
Last Name					ne				Middle Initia	ıl
Mailing Address					City					
State Zip Cell Telephone No.					elephone No.	Business Phone No.		E-Mail Ad	Idress	
Driver's License # State Expiration					De Operators (Private Vehicle) CDL (present license for HR to copy) License Class Endorsement					
If you an	Have you ever been convicted of a felony? Yes \(\sigma \) No \(\sigma \) If you answered yes, please complete the following: (Conviction is not an automatic bar to employment. Each case is considered on its individual merits). Nature of Offense Name & Location of Court Date of Conviction									
	of your educational or ease give the last name			er a differ	ent last name? Yes	□ No □				
Have you If yes, ple Employer	ever been discharged ease give employer, d	or forced to resign ate and reason.	from any po		Yes 🗆 No 🗆					
If hired, a	are you authorized to vitizens, a copy of you	work in the United Sur authorization to v	States? Yes	s Noy the U.S	To □ . Immigration and Na	turalization Service m	ust be sub	omitted prior	to appointm	ent.
References								fice Use Onl		
	Name	· · · · · · · · · · · · · · · · · · ·		Telephone Number				na rime need	51,04	
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							Accept	ted by: ()
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		EDU	CATIONAN	D TRAII	NING					
	ELEN	MENTAR	YAND HIGH	SCHOOL	EDUCA	ΓΙΟΝ				
Highest Grade Completed (choose one □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 □ 10 □ 11 □ 1	a GED?		e from High S	School or	obtain	(High Sch Name:	ool, Juni	of Last Schoor High or El	ementary)	
Related Special Training (Correspond	ence, Busin	ess, Trad	les, Vocational	, Armed l	Forces Scl					
Name and Locations of School(s)	Dates Attended			es/Subjects Completed			Credi Hour	t Diplom	Diplomas/Certificates Received	
					· · · · · · · · · · · · · · · · · · ·					
COLLEGI			IES ATTENDI rom a recogn				ADUATE)		
Name and Locations of School(s)		ust ve Ji	om a recogn	Dates A (Mo	ttended & Yr)	Degree <u>E</u> (e.g. BA	/BS)	Major	Minor	
				From	То	List IF con	mpleted			
	RELATE	D LICEN	ISES (provide c	urrent ori	ginal for I	HR to copy)				
Professional License Issued By	Field/	Trade S	pecialization		Licens	se Number		Issue Date	Expiration Date	
			SKIL	LS						
LACOI	er Software	2				Language	es spoker	and written	FLUENTLY	
☐ Word/WordPerfect										
☐ PowerPoint								· · · · · · · · · · · · · · · · · · ·		

3	Starting Date Ending Date month / day / year month / day / year		Employer/Company Name and address (city and state are required)				
Paid V	Work Volunteer	Hours per Week	Name & Title	of Immediate Supervisor	Telephone Number		
Reason f	or Leaving						
Title of I	Position Held			Number & Job Title of Employee	es you Supervised		
Describe	job responsibilities in o	order of importance:					
	·						
				-			
	G. C. D.						
4	Starting Date month / day / year	Ending Date month / day / year	Employer/Con	mpany Name and address (city and	state are required)		
Paid '	Work Volunteer	Hours per Week	Name & Title	of Immediate Supervisor	Telephone Number		
Reason f	or Leaving						
Title of Position Held Number & Job Title of Employees you Supervised							
Describe							
Beschoo	job responsibilities in o	order of importance:					
Bosonso	job responsibilities in o	order of importance:					
Describe	job responsibilities in o	order of importance:					
Contract	job responsibilities in o	order of importance:					
Control	job responsibilities in o	order of importance:					
Costrac	job responsibilities in o	order of importance:					
	job responsibilities in o	order of importance:					
	job responsibilities in o	order of importance:					

		Ending Date month / day / year	Employer/Company Name and address (city and state are required)					
Paid	Work Volunteer	Hours per Week	Name & Title of Immediate Super	visor Telepl	hone Number			
Reason i	For Leaving	L						
Title of l	Position Held		Number & Job Tit	le of Employees you Superv	vised			
Describe	job responsibilities in	order of importance:						
<u></u>								
			OF EMPLOYMENT STATEMEN	NT				
-		-	ions on this application are true.	*.IID *1IC	. 13:			
Adrian and rejected an will be mad	Blissfield Railroad Comp d/or subject me to dismiss	any to me in any way. I furth al. Candidates selected for h Resources Director or a duly	re me of a position with Adrian & Blissiner understand that any misrepresentation ire must pass a physical and drug screen authorized representative. Adrian & Bl	on herein WILL cause my appli a prior to employment. I am aw	ication to be vare that the results			
By my sigr	nature, I certify, authorize a	and acknowledge the above s	statements.					
	Signatu (Unsigned applications wil		Date	Social Security	Number			