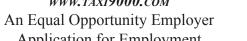
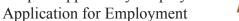


TAXI 9000 OF BISMARCK

BIS-MAN TRANSIT ** THE CAT 3750 East Rosser Avenue, Bismarck, ND 58501 701-223-9035 www.taxi9000.com









PERSONAL INFORMATION							
Name			Date				
Last	First	Middle					
Date of Birth	Social Security Number						
	Apt. Number						
City State 7in Code							
Phone (Include Area Code): Home ()	Business ()				
Email Address							
Email Address Are you legally authorized or permitted to work in the United States? YES NO (W							
(You will be required to provide eviden	ce of employability in th	ie United States)					
Have you ever been convicted of a crir							
Bismarck and Mandan City ordinances		· ·	-				
last 3 years from obtaining a Taxi Drivers License in the City, without it you CANNOT be a driver for our company)							
YESNO If yes, explain							
Can you perform the essential function	s of the job for which v	ou are applying with or w	ithout reasonable				
accommodation? (If you have any ques	•						
answering this question.) YES_		5 1	0				
POSITION APPLYING FOR							
Type of Work		Full Time Pay Desired \$					
Pafarrad Py		Date Available					
Referred By							
Are you employed now? Yes No		May we contact your current employer? YN					
Have you applied to the company before? Yes No		Where? When?					
Have you worked for this company before? Yes No		Where?	When?				
		I					
EDUCATION							
High School							
Name		City	State				
Did you graduate? Yes No	If no, GED? Yes	No					
Business or Technical School Did you graduate? Yes No Degree/Major							
Did you graduate? Yes No	Degree/Major						
Undergraduate College							
Did you graduate? Yes No	Degree/Major						

PLEASE CONTINUE APPLICATION ON THE REVERSE SIDE

EMPLOYMENT EXPERIENCE

Start with your present or last job, include military service assignments and volunteer activities. You may exclude organization names which indicate race, color, religion, gender, national origin, handicap and/or other protected status.

1. Employer	Dates Employed		Work Performed
	From	То	
Telephone			
Address Job Title	Hourly Rate/Salary		
Supervisor Reason for Leaving	Starting	Final	
2. Employer	Dates Employed		Work Performed
	From	То	
Telephone			
Address Job Title	Hourly Rate/Salary		
Supervisor Reason for Leaving	Starting	Final	
3. Employer	Dates Employed		Work Performed
	From	То	
Telephone		I	
Address Job Title	Hourly Rate/Salary		
Supervisor Reason for Leaving	Starting	Final	

WORK REFERENCES

Give below the names of three persons, not related to you, who know about your work.

Name	Address	Phone	Years Known	Business

INTRODUCTORY PERIOD

The rst 90 days of employment shall be considered an introductory ("probationary") period. During that period you may resign or you may be released by our organization without a stated reason. Signed

AUTHORIZATION

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I become employed, falsi ed statements on this application will be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give prospective employer any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing same to you. I understand that if hired, my employment is for no de nite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice

Signature