



**APPLICATION FOR
RANCHO DELORO COMPANIES INC.**

P.O. Box 2150
Del Mar, CA
92014

6050 Avenida Encinas,
Carlsbad, CA
92009

1167 W. Palm Ave,
El Cajon, CA
92020

1810 Don Lee Pl.
Escondido, CA
92029

9063 Airway Rd,
San Diego, CA
92154

196 Bosstick Blvd,
San Marcos, CA
92069

2260 La Mirada Dr.
Vista, CA
92081

Date of application _____

Name (as it appears on Social Security Card) _____ SSN _____

Alias (if any) _____

Current Address _____

Former Addresses (last 5 years) _____

Former Addresses _____

Former Addresses _____

Former Addresses _____

Home Number (____) _____

Daytime Number (____) _____

Name of person to notify in case of emergency _____

Phone number _____ Relationship _____

Select the job(s) you are applying for:

- | | |
|---|--|
| <input type="checkbox"/> Yard Worker | <input type="checkbox"/> Management Trainee |
| <input type="checkbox"/> Tow Truck Driver | <input type="checkbox"/> Customer Service/Clerical |
| <input type="checkbox"/> Mechanic | <input type="checkbox"/> Sales Representative |
| <input type="checkbox"/> Dispatcher | <input type="checkbox"/> Accounting |

Select the location(s) you are applying for:

- North County Coastal
- North County Inland
- East County
- South County

Describe the type of work you want:

- Full Time
- Part Time
- Any of the above
- Day Shift
- Night Shift

What rate of pay do you expect? _____

If hired, when can you begin work? _____

Education Background:

Education	Highest Level	Graduate/GED? Y/N	Major	Name of Institution
Junior High/High School	8 9 10 11 12	_____	_____	_____
College	1 2 3 4	_____	_____	_____
Technical	1 2 3 4	_____	_____	_____

Have you ever applied to work at Rancho Del Oro Towing before? _____

If yes, when? _____ For what position? _____

Were you hired? _____

Reason for leaving? _____

Are you over 21 year's old _____.

Do you know anyone employed by Rancho Del Oro Towing? _____ First/Last Name _____

Are you related by blood or marriage to anyone employed by Rancho Del Oro Towing? _____

How did you find out about this position? _____

Please list all tickets that you have received in the past 3 years:

Date of citation	Nature of offense
_____	_____
_____	_____
_____	_____
_____	_____

Please list the facts and circumstances of any denial, revocation, or suspension of any license, permit, or privilege to operate a motor vehicle that has been issued to the applicant or provide a statement that no such denial, revocation, or suspension has occurred:

Please list all accidents/incidents that you have been involved in during the past 3 years. List all incidents regardless of fault.

Date of Accident	Description	Location	Injuries	Status
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Have you ever been convicted of a felony? If so, please list charge and date.

Do you use any form of drugs or narcotics that could interfere with your ability to operate a commercial motor vehicle safely?

Have you ever served in the military? If yes, please list dates, specialty, and branch of service.

Have you attended any truck driving training schools? If yes, please list dates and names.

Have you ever been convicted of a crime under your current or previous name(s) involving: alcohol, controlled substances, firearms, weapons, dishonesty, threats, violence, or anything else? _____ If yes, please describe below:

Date Convicted	Offense	Penalty	Location of Offense	Status
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

*Note: A conviction will not necessarily prevent you from being offered employment.

Current driver's license:

State of issue _____ License number _____ Expiration date _____

List all states that you have held licenses in during the past 3 years:

State	License Number
_____	_____
_____	_____
_____	_____

Can you drive a manual transmission? ___ Yes ___ No

List all driving experience

Class A _____ From _____ To _____

Class B _____ From _____ To _____

Do you have experience with the following? If so, how many years?

Wheel Lift _____

Sling _____

Flatbed _____

Double Dipping _____

Recovery _____

Medium Duty _____

Heavy Duty _____

Car Carrier _____

Fork Lift _____

Past employment history
Please list all employment for the past 3 years.
Periods of unemployment must also be accounted for. Begin with the most recent employer and work back.
Phone numbers and addresses are required

Are you currently employed? _____ May we contact your current employer? _____

Employer _____ Phone number _____

Address _____ Supervisor _____

Dates employed: From _____ To _____

Description of position _____

Reason for leaving: _____

Employer _____ Phone number _____

Address _____ Supervisor _____

Dates employed: From _____ To _____

Description of position _____

Reason for leaving: _____

Employer _____ Phone number _____

Address _____ Supervisor _____

Dates employed: From _____ To _____

Description of position _____

Reason for leaving: _____

Employer _____ Phone number _____

Address _____ Supervisor _____

Dates employed: From _____ To _____

Description of position _____

Reason for leaving: _____

Employer _____ Phone number _____

Address _____ Supervisor _____

Dates employed: From _____ To _____

Description of position _____

Reason for leaving: _____

List all driving experience in the 7 years prior to the above 3.

Employer _____ Phone number _____

Address _____ Supervisor _____

Dates employed: From _____ To _____

Description of position _____

Reason for leaving: _____

Employer _____ Phone number _____
 Address _____ Supervisor _____
 Dates employed: From _____ To _____
 Description of position _____
 Reason for leaving _____

Employer _____ Phone number _____
 Address _____ Supervisor _____
 Dates employed: From _____ To _____
 Description of position _____
 Reason for leaving _____

Employer _____ Phone number _____
 Address _____ Supervisor _____
 Dates employed: From _____ To _____
 Description of position _____
 Reason for leaving _____

Employer _____ Phone number _____
 Address _____ Supervisor _____
 Dates employed: From _____ To _____
 Description of position _____
 Reason for leaving _____

RANCHO DEL ORO TOWING IS AN AT WILL COMPANY

- _____ Yes, I understand Rancho Del Oro Towing is an at will company.
 _____ No, I do not understand Rancho Del Oro is an at will company.

THERE IS ZERO TOLERANCE FOR SEXUAL HARRASMENT HERE AT RANCHO DEL ORO TOWING.

Applicant signature _____ Date _____

I hereby certify that the above information is true and correct to the best of my knowledge. I understand that any falsified, misleading, or untrue statements will result in my not being granted employment. I also understand that if at any future date any of the above information is deemed to have been false, that my employment may be revoked at that time. By my signature below, I grant permission for the company that I am applying to investigate my background and past employment and any other rights and responsibilities listed in the Federal Motor Carrier Safety Administration Section 391.21. Finally, I understand that completing this application in no way assures that I will be employed by Rancho Del Oro Companies, Inc.

Applicant signature _____ Date _____

PLEASE BRING THIS TO THE NEAREST LOCATION OR FAX TO (760) 923-5553