

**APPLYING  
FOR**Cab Driver Office Person Shop Lease **I WAS REFERRED BY:**

\_\_\_\_\_ TA \_\_\_\_\_

TODAY'S DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

LAST NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_

**BEFORE YOU BEGIN FILLING OUT THIS APPLICATION  
YOU SHOULD KNOW THIS:**

- ✓ ALL PARTS OF THIS APPLICATION MUST BE COMPLETED  
(IF INCOMPLETE OR FALSIFIED, IT WILL NOT BE CONSIDERED)
- ✓ YOU MUST HAVE A CURRENT D.M.V. PRINT OUT  
(THE PRINT OUT WILL NOT BE RETURNED, MAKE YOUR OWN COPIES)
- ✓ YOU MUST BE ABLE TO SPEAK, READ AND WRITE ENGLISH
- ✓ FOR EMPLOYMENT, YOU MUST HAVE PROOF OF LEGAL STATUS IN THE U.S.  
(S.S. CARD, I.N.S CARD, PASSPORT, ETC.)
- ✓ NO FELONY CONVICTIONS IN THE LAST 5 YEARS  
(THE APPLICATION WILL NOT BE CONSIDERED)
- ✓ NO D.U.I. CONVICTIONS IN THE LAST 3 YEARS  
(THE APPLICATION WILL NOT BE CONSIDERED)
- ✓ YOU MUST PASS A URINE DRUG AND ALCOHOL TEST  
(YOU ARE RESPONSIBLE FOR THE COST)
- ✓ YOU MUST BE 25 YEARS OF AGE OR OLDER TO WORK AS A CAB DRIVER



**HAVE YOU EVER WORKED FOR A CAB COMPANY IN LAS VEGAS?**

**YES\_\_\_ NO\_\_\_**

**IF YOU ANSWERED YES, FILL THE INFO BELOW  
(DON'T LEAVE ANYTHING OUT)**

1. Company\_\_\_\_\_

From \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

Reason for leaving: \_\_\_\_\_

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2. Company\_\_\_\_\_

From \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

Reason for leaving: \_\_\_\_\_

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3. Company\_\_\_\_\_

From \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

Reason for leaving: \_\_\_\_\_

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4. Company\_\_\_\_\_

From \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

Reason for leaving: \_\_\_\_\_

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**YOUR INFORMATION**

FULL NAME \_\_\_\_\_ DATE \_\_\_\_\_  
 \_\_\_\_\_ LAST NAME FIRST NAME M.I. MO / DAY / YEAR

ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ FULL ADDRESS APARTMENT OR UNIT #

PHONE# \_\_\_\_\_ ALTERNATE PHONE# \_\_\_\_\_  
 ( ) ( ) CITY STATE ZIP CODE

DATE OF BIRTH \_\_\_\_\_ HOW OLD ARE YOU? \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_  
 / / - -

EMAIL ADDRESS \_\_\_\_\_ @ \_\_\_\_\_

ARE YOU A U.S. CITIZEN? YES NO If no, are you authorized to work in the U.S.? YES NO

HAVE YOU EVER WORKED FOR DESERT CAB? YES NO If so, when? \_\_\_\_\_

DO YOU HAVE A VALID NV DRIVER LICENSE? YES NO D.L. # \_\_\_\_\_

DO YOU HAVE A VALID T.A. CARD? YES NO Permit # \_\_\_\_\_

**YOUR EDUCATION BACKGROUND**

ELEMENTARY: \_\_\_\_\_ CITY & STATE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
 HIGH SCHOOL: \_\_\_\_\_ CITY & STATE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_ DID YOU GRADUATE? YES NO DEGREE: \_\_\_\_\_

COLLEGE: \_\_\_\_\_ CITY & STATE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_ DID YOU GRADUATE? YES NO DEGREE: \_\_\_\_\_

**PEOPLE WHO KNOW YOU**

LIST 3 REFERENCES (OUT OF TOWN O.K.)

FULL NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ PHONE # ( ) \_\_\_\_\_

FULL NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ PHONE # ( ) \_\_\_\_\_

FULL NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ PHONE # ( ) \_\_\_\_\_



**YOUR PREVIOUS 3 EMPLOYERS (START WITH THE MOST RECENT)**

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

**YOU ARE ALMOST DONE**

**ANSWER THE FOLLOWING QUESTIONS  
(DO NOT LEAVE ANYTHING OUT)**

Has your driver license ever been suspended or revoked? YES  NO

Have you ever received a citation from the Taxicab Authority? YES  No

When and why? \_\_\_\_\_

When and why? \_\_\_\_\_

Are you able to work full time? YES  NO

Can you lift and carry 70 pounds? YES  NO

Are you capable of using GPS? YES  NO



Email: \_\_\_\_\_@\_\_\_\_\_

Have you ever been convicted of a felony? YES  NO  If yes, please explain \_\_\_\_\_

Have you ever been convicted of a D.U.I.? YES  NO  If yes, please explain \_\_\_\_\_

**ACCIDENT HISTORY**

WHETHER AT FAULT OR NOT, HAVE YOU EVER BEEN INVOLVED IN AN AUTOMOBILE ACCIDENT? YES \_\_\_\_ NO \_\_\_\_  
IF YES EXPLAIN (LIST ALL ACCIDENTS, AT FAULT OR NOT AND DON'T LEAVE ANYTHING OUT)

1. WHEN \_\_\_\_ / \_\_\_\_  
Month Year

DETAILS: \_\_\_\_\_  
\_\_\_\_\_

2. WHEN \_\_\_\_ / \_\_\_\_  
Month Year

DETAILS: \_\_\_\_\_  
\_\_\_\_\_

3. WHEN \_\_\_\_ / \_\_\_\_  
Month Year

DETAILS: \_\_\_\_\_  
\_\_\_\_\_

4. WHEN \_\_\_\_ / \_\_\_\_  
Month Year

DETAILS: \_\_\_\_\_  
\_\_\_\_\_

5. WHEN \_\_\_\_ / \_\_\_\_  
Month Year

DETAILS: \_\_\_\_\_



**DISCLAIMER AND SIGNATURE**

***In making this application, I understand that my character, reputation for honesty, habits, ability, records of convictions if any, financial responsibility and reasons for leaving employment may be investigated and the persons who know me may be contacted and questioned about me which I hereby give my consent.***

***The information provided in this application is true, correct and complete. If employed, any misstatements or omissions may result in my dismissal.***

***I understand that acceptance of an offer of employment does not create a contractual obligation upon Desert Cab to continue to employ me in the future.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**All prospective employees will receive equal consideration without regard to race, creed, color, sex, sexual preference, age, national origin, handicap or veteran status.**

**FOR OFFICE USE ONLY**

NOTES \_\_\_\_\_  
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\_\_\_\_\_