

PLANT PEDDLERS, INC.
1107 SPLIT OAK ROAD
WILLOW SPRINGS, MO 65793

INQUIRY TO PAST EMPLOYER

Date _____

To: _____

ATTENTION _____

I, _____, hereby authorize you to release all information concerning my employment, including oral assessments of my job performance, ability, fitness, and alcohol and controlled substance tests as a result of providing the above-mentioned information to this company.

Signature of Applicant _____

Social Security Number _____

Date _____

Dates of Employment

From _____ to _____ Position _____

If employed as a driver / owner-operator, type of equipment pulled or used:

Accident Record – see attached form

Date : _____ Preventable ___ Non Preventable _____

Date : _____ Preventable ___ Non Preventable _____

Any other information regarding accidents: _____

Reason for Leaving : Quit _____ Discharged _____ Other _____

Eligible for Rehire: Yes _____ No _____ Upon Review _____

Comments _____

Has this person tested positive for a controlled substance in the past 3 years? Yes ___ No ___

Has this person tested .04 or greater for Breath Alcohol Concentration in the last 3 years?

Yes ___ No ___

Has this person refused a required test for drug or alcohol in the last 3 years? Yes ___ No ___

Signature / Position of person Supplying Information _____

Date _____