

# EASTON COACH

## Application for Employment

**Note:** Read and complete all portions of this document in your own handwriting [legible] in ink [PLEASE PRINT]. Applications that are incomplete or filled out in pencil or typed may be rejected. Federal and State laws prohibit discrimination based on certain characteristics. **Easton Coach** is an equal opportunity employer. (610) 253-4055

This application will be considered as active for ninety (90) days from the application date.

An individual is not permitted to drive a motor vehicle by the Department of Transportation unless he/she is physically qualified to do so. If, prior to a conditional offer of employment, you are uncertain as to whether or not you are capable of passing the DOT physical or have questions about the requirements, you may submit your application and, if contacted about employment, request additional information from our personnel. Once a conditional offer of employment may be made, you may be required to answer some medical question and may be sent for a physical examination. Any information provided to **Easton Coach** is strictly confidential and will be used only for the purposes allowed by the Department of Transportation.

### PERSONAL INFORMATION

Date: \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Leave Message At: (\_\_\_\_) \_\_\_\_\_  
Last First Full Middle

Present Address: \_\_\_\_\_ How Long? \_\_\_\_\_  
Street City State Zip Years/Months

Prior Address: \_\_\_\_\_ How Long? \_\_\_\_\_  
Street City State Zip Years/Months

Prior Address: \_\_\_\_\_ How Long: \_\_\_\_\_  
Street City State Zip Years/Months

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ \*Date of Birth \_\_\_\_\_ \*The DOT requires that we ask your age and that all Commercial drivers be a minimum of 21 years old.

Are you an U.S. Citizen?  Yes  No If No, Do you have a legal right to work in the U.S.?  Yes  No  
 Do you have a current permit to travel outside the U.S.?  Yes  No

Have you previously been employed with **Easton Coach, VecTour, Travelways, or Palmeri Motorcoach**?  No  Yes (If so, when? \_\_\_\_\_)

Were you referred by a **Easton Coach** employee?  No  Yes (If so, by whom?) \_\_\_\_\_  
Name

### EMPLOYMENT PREFERENCES

(Check all that apply)

- MOTOR COACH FULL-TIME  MOTOR COACH PART-TIME  OFFICE- ADMINISTRATIVE  MECHANIC  
 SHUTTLE VAN FULL-TIME  SHUTTLE VAN PART-TIME  OFFICE – CLERICAL  DETAIL – WASH BAY  
 OTHER \_\_\_\_\_

### EDUCATIONAL BACKGROUND

Name and Location	Years Completed	Did you Graduate?		Course of Study
High School				
College		Major	Degree	
Other				

### MILITARY SERVICE RECORD

Have you ever served in the armed service?  Yes  No Branch:  Army  Navy  Air Force  Marines  Coast Guard  Nat'l Guard  Reserves

Dates of Service: From \_\_\_\_\_ To \_\_\_\_\_ Rank at Discharge \_\_\_\_\_

In the last 5 years have you been court-martialed or received non-judicial punishment?  Yes  No If Yes, Date(s): \_\_\_\_\_ Explain \_\_\_\_\_

IF discharged or active National Guard/Reserves: Person to contact \_\_\_\_\_ Duty Phone # (\_\_\_\_) \_\_\_\_\_

### TRAINING

List any training program presently attending or completed (motor coach, driving school, service school, etc.)

\_\_\_\_\_  
School Name City State (\_\_\_\_) Phone Number From Mo/Day/Yr To Mo/Day/Yr

## EMPLOYMENT RECORD

### PAST 5 YEARS (10 YEARS OF COMMERCIAL DRIVING)

Begin with your present or most recent job and work backwards in order, listing your employers for at least 5 years including all full- and part-time employment. All time must be accounted for including military service, school, self-employment and period of unemployment. Provide 10 years of commercial driving employment. Use supplementary sheet if necessary for more than 5 employers. List all employment for most recent 3 years, and commercial driving only for remaining 7 years to equal 10 years driving experience. We must have telephone numbers for all employers and references.

IF CURRENTLY UNEMPLOYED, PLEASE LIST DATES FROM \_\_\_\_\_ TO \_\_\_\_\_

**CURRENT EMPLOYER:** Name \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Are you presently employed?  Yes  No May we call your current employer?  Yes  No  
 Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Dates of Employment: Street \_\_\_\_\_ City \_\_\_\_\_ State & Zip \_\_\_\_\_  
 Position Held \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
 List months prior experience with each type of equipment \_\_\_\_\_ 40' Motorcoach \_\_\_\_\_ 45' Motorcoach \_\_\_\_\_ Van  
 Other: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_

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

IF UNEMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

**2<sup>nd</sup> LAST EMPLOYER:** Name \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Are you presently employed?  Yes  No May we call your current employer?  Yes  No  
 Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Dates of Employment: Street \_\_\_\_\_ City \_\_\_\_\_ State & Zip \_\_\_\_\_  
 Position Held \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
 List months prior experience with each type of equipment \_\_\_\_\_ 40' Motorcoach \_\_\_\_\_ 45' Motorcoach \_\_\_\_\_ Van  
 Other: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_

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

IF UNEMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

**3<sup>rd</sup> LAST EMPLOYER:** Name \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Are you presently employed?  Yes  No May we call your current employer?  Yes  No  
 Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Dates of Employment: Street \_\_\_\_\_ City \_\_\_\_\_ State & Zip \_\_\_\_\_  
 Position Held \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
 List months prior experience with each type of equipment \_\_\_\_\_ 40' Motorcoach \_\_\_\_\_ 45' Motorcoach \_\_\_\_\_ Van  
 Other: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_

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

IF UNEMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

**4<sup>th</sup> LAST EMPLOYER:** Name \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Are you presently employed?  Yes  No May we call your current employer?  Yes  No  
 Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Dates of Employment: Street \_\_\_\_\_ City \_\_\_\_\_ State & Zip \_\_\_\_\_  
 Position Held \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
 List months prior experience with each type of equipment \_\_\_\_\_ 40' Motorcoach \_\_\_\_\_ 45' Motorcoach \_\_\_\_\_ Van  
 Other: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_

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

IF UNEMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

**5<sup>th</sup> LAST EMPLOYER:** Name \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Are you presently employed?  Yes  No May we call your current employer?  Yes  No  
 Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Dates of Employment: Street \_\_\_\_\_ City \_\_\_\_\_ State & Zip \_\_\_\_\_  
 Position Held \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
 List months prior experience with each type of equipment \_\_\_\_\_ 40' Motorcoach \_\_\_\_\_ 45' Motorcoach \_\_\_\_\_ Van  
 Other: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_

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

## SUPPLEMENTARY EMPLOYMENT RECORD PAST 5 YEARS (10 YEARS OF COMMERCIAL DRIVING)

Continue with your most recent job and work backwards in order, listing your employers for at least 5 years including all full- and part-time employment. All time must be accounted for including military service, school, self-employment and periods of unemployment. Provide 10 years of commercial driving employment. Use supplementary sheet if necessary for more than 5 employers. List all employment for most recent 3 years, and commercial driving only for remaining 7 years to equal 10 years driving experience. We must have telephone numbers for all employers and references.

IF UNEMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

**6<sup>th</sup> LAST EMPLOYER:** Name \_\_\_\_\_ Supervisor \_\_\_\_\_

Are you presently employed?  Yes  No May we call your current employer?  Yes  No  
Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Dates of Employment:

Street \_\_\_\_\_ City \_\_\_\_\_ State & Zip \_\_\_\_\_  
Position Held \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
List months prior experience with each type of equipment \_\_\_\_\_ 40' Motorcoach \_\_\_\_\_ 45' Motorcoach \_\_\_\_\_ Van \_\_\_\_\_

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

Other: \_\_\_\_\_

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

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

IF UNEMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

**7<sup>th</sup> LAST EMPLOYER:** Name \_\_\_\_\_ Supervisor \_\_\_\_\_

Are you presently employed?  Yes  No May we call your current employer?  Yes  No  
Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Dates of Employment:

Street \_\_\_\_\_ City \_\_\_\_\_ State & Zip \_\_\_\_\_  
Position Held \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
List months prior experience with each type of equipment \_\_\_\_\_ 40' Motorcoach \_\_\_\_\_ 45' Motorcoach \_\_\_\_\_ Van \_\_\_\_\_

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

Other: \_\_\_\_\_

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

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

IF UNEMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

**8<sup>th</sup> LAST EMPLOYER:** Name \_\_\_\_\_ Supervisor \_\_\_\_\_

Are you presently employed?  Yes  No May we call your current employer?  Yes  No  
Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Dates of Employment:

Street \_\_\_\_\_ City \_\_\_\_\_ State & Zip \_\_\_\_\_  
Position Held \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
List months prior experience with each type of equipment \_\_\_\_\_ 40' Motorcoach \_\_\_\_\_ 45' Motorcoach \_\_\_\_\_ Van \_\_\_\_\_

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

Other: \_\_\_\_\_

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

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

IF UNEMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

**9<sup>th</sup> LAST EMPLOYER:** Name \_\_\_\_\_ Supervisor \_\_\_\_\_

Are you presently employed?  Yes  No May we call your current employer?  Yes  No  
Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Dates of Employment:

Street \_\_\_\_\_ City \_\_\_\_\_ State & Zip \_\_\_\_\_  
Position Held \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
List months prior experience with each type of equipment \_\_\_\_\_ 40' Motorcoach \_\_\_\_\_ 45' Motorcoach \_\_\_\_\_ Van \_\_\_\_\_

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

Other: \_\_\_\_\_

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

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

IF UNEMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

**10<sup>th</sup> LAST EMPLOYER:** Name \_\_\_\_\_ Supervisor \_\_\_\_\_

Are you presently employed?  Yes  No May we call your current employer?  Yes  No  
Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Dates of Employment:

Street \_\_\_\_\_ City \_\_\_\_\_ State & Zip \_\_\_\_\_  
Position Held \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
List months prior experience with each type of equipment \_\_\_\_\_ 40' Motorcoach \_\_\_\_\_ 45' Motorcoach \_\_\_\_\_ Van \_\_\_\_\_

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

Other: \_\_\_\_\_

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

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

**MOTOR VEHICLE LICENSES** (List ALL Driver Licenses held in the past 5 years)

STATE	LICENSE NUMBER	CLASS	DATES SURRENDERED	EXPIRATION DATE	COMMERCIAL DRIVERS LICENSE?
Current License					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

Which Endorsements do you have, if any? \_\_\_\_\_

	YES	NO	DATE (MONTH/YEAR)
While operating a <b>commercial vehicle</b> have you <b>ever</b> been convicted for driving under the influence of alcohol, a narcotic drug, marijuana, amphetamines or derivatives thereof suspended and revoked? .....	<input type="checkbox"/>	<input type="checkbox"/>	_____
While operating a <b>commercial vehicle</b> have you <b>ever</b> been convicted of reckless driving, careless driving or careless operation of a motor vehicle, or are any charges pending? .....	<input type="checkbox"/>	<input type="checkbox"/>	_____
In the last 5 years, have you been convicted for careless driving or careless operation of a motor vehicle? .....	<input type="checkbox"/>	<input type="checkbox"/>	_____
In the last 5 years, have you been convicted for reckless driving of a motor vehicle? .....	<input type="checkbox"/>	<input type="checkbox"/>	_____
In the last 5 years, have you been convicted for driving under the influence of alcohol, a narcotic drug, marijuana, amphetamines or derivatives thereof, or are any charges pending? .....	<input type="checkbox"/>	<input type="checkbox"/>	_____
In the last 5 years have you ever been convicted for possession, sale or transfer of a narcotic drug, marijuana, amphetamines or derivatives thereof, or are any charges pending? .....	<input type="checkbox"/>	<input type="checkbox"/>	_____
<b>Has any license, permit or privilege ever been suspended or revoked for any reason?</b> .....	<input type="checkbox"/>	<input type="checkbox"/>	_____
Have you ever tested positive on any drug test, tested at a breath alcohol concentration level of 0.02% or greater on a breath alcohol test, or refused to take a drug or alcohol test when you were required to do so in accordance with any federal regulation or a previous/current employer's company policy? .....	<input type="checkbox"/>	<input type="checkbox"/>	_____
If you answered <b>YES</b> to any of the above, please explain: _____			
_____			
_____			

**TRAFFIC CONVICTIONS AND FORFEITURES – If None, write “None”**

List all traffic convictions, forfeitures or suspensions of license in a motor vehicle (other than parking violations) for the **past 5 years**

DATE	TYPE OF VEHICLE	LOCATION (STATE)	CHARGE	PENALTY

**ACCIDENT RECORD – If None, write “None”**

List all accidents you have been involved in while operating a truck, car, motorcycle or other motorized vehicle, including property damage, in the **past 5 years**. **Include all accidents - whether or not you were at fault.**

DATE	TYPE	NATURE OF ACCIDENT	WERE YOU AT FAULT?	WERE YOU TICKETED?	FATALITIES	INJURIES	PENALTY

**RECORD OF CONVICTIONS, DEFERRED PROSECUTIONS AND PENDING CHARGES – If None, write “None”**

List all felonies of which you have ever been convicted, and all misdemeanors within the last 5 years that you have pled “guilty” to, been convicted of, had prosecution deferred in connection with, or pled “no contest”

Month/Year	City/State/County/Country	Charges	Check One		Sentence
			Felony	Misd	

List all unresolved charges pending in the judicial system – **If None, write “None”**

Month/Year	City/State/County/Country	Charges	Check One	
			Felony	Misd

# MAINTENANCE EXPERIENCE & QUALIFICATIONS

(Please complete only if applying for a maintenance position)

List courses and training in maintenance work \_\_\_\_\_

## Job Function

Indicate training and experience in the following:	Formal Training (Check)	Years of Experience	Area	Formal Training (Check)	Years of Experience
Drive Line Components			Body Work		
Diesel Engine Tune-up and Rebuild			Electrical Repair		
Gas Engine Tune-up and Rebuild			Frame & Wheel Alignment		
Tire Service			Brakes		
Trailer Repair			Cooling System		
Air Conditioning			Inspections		
			General Car Repair		

## Shop Equipment

Indicate training and experience in the following:	Formal Training (Check)	Years of Experience	Area	Formal Training (Check)	Years of Experience
Electrical Diagnostic Equipment			Time Servicing Machine		
Sheet Metal Equipment			Wheel & Tire Balancing Machine		
Frame & Axis Straightening Equip			Tire Recapping Mold		
Engine Rebuilding			Engine Dynamometer		
Diesel Injection Equipment			Chassis Dynamometer		
Electric Welder			Magnetic Crack Detector		
Oxyacetylene Welder			Engine Analyzer		
Paint Spray Gun			Noise Measuring Equipment		
Air Conditioning			Smoke Measuring Equipment		
			Inspections		
			General Car Repair		

# CLERICAL EXPERIENCE & QUALIFICATIONS

List courses and training in clerical work \_\_\_\_\_

Indicate training and experience in the following:	Formal Training (Check)	Years of Experience	Area	Formal Training (Check)	Years of Experience
Typing (WPM)			Dictating Machine		
Shorthand (WPM)			Claims		
Billing			Cashier		
Filing			Accounting		
Computers (Indicate Software)			Switchboard Equipment (Indicate Type)		
Word Processing Equipment			Dispatcher		
Calculator			Other		
Adding Machine					
Facsimile					
Photocopier					

**PHYSICAL REQUIREMENT FOR POSITION** - All applicants must meet the D.O.T. and **Easton Coach** physical qualifications requirements.

- Are you physically able, with or without a reasonable accommodation:** YES NO
- ❖ to operate a commercial motor vehicle for long periods of time? .....
  - ❖ to move freight weighing up to 50 pounds per piece frequently and up to 100 pounds per piece occasionally, a distance of up to 50 feet for extended periods of time? .....
  - ❖ to climb in and out of a Van or Motorcoach (4 to 6 feet) frequently? .....
  - ❖ to reach, push and/or pull above shoulder level with both arms to load and unload freight for extended periods of time? .....
  - ❖ to complete written logs and expense records? .....
  - ❖ to conduct pre-trip inspections of Van or Motorcoach? .....
  - ❖ to fuel and perform preventative maintenance on a Van or Motorcoach? .....
  - ❖ to push, pull, or maneuver an individual in a wheelchair up or down ramps or a minimal amount of steps? .....

Date of last physical examination: \_\_\_\_\_ Was this a DOT Physical  Yes  No  
 Doctor's Name & Address \_\_\_\_\_

**OTHER JOB HISTORY**

In the last 5 years have you been denied bonding?  Yes  No

**EMERGENCY CONTACT** Person to be notified in case of an emergency

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

**REFERENCES**

Give below the names of three people not related to you, who you have known at least one year.

Name and Address	Telephone	Years Known

- 1) I understand that **Easton Coach** is under no obligation to hire me, and that any employment I am offered will not be for any specified period of time, and that my employment is terminable by either party at will, with or without notice or cause, and that no representative of **Easton Coach** has the authority to enter into any agreement with me contrary to the foregoing. I understand that nothing contained in my employment applications, or in granting of an interview, is intended to create an employment contract between **Easton Coach** and myself for either employment or for the providing of any benefit. I understand that none of the benefits or policies in any handbook issued to me by **Easton Coach** are intended by reason of its publication to confer any rights or privileges to any benefits or policies, or to entitle me to remain employed by **Easton Coach** or to change my status as an "at will" employee. I understand that all statements and provisions in the handbook are procedural or are guidelines and **Easton Coach** has the right to change any policy, benefit, or procedure at any time without notice.
- 2) I understand I will be required to submit to and pass a drug test or other tests, as required, as a condition of pre-employment and thereafter as warranted by **Easton Coach** policy and/or federal regulations. I understand **Easton Coach** may contract with a third party to assist in the administration of drug and alcohol testing and agree to this party being provided with all information to which **Easton Coach** is entitled and subject to the same confidentiality requirements as **Easton Coach**. I further understand that any offers made to me will be contingent on the results of the test. A positive reading from the tests will automatically null and void any offers or considerations made to me.
- 3) In accordance with the provisions of 49 CFR Part 382.413, I hereby authorize and require the employers specifically listed by me on page 2 and 3 of this application to release the results (including any refusal to test) to **Easton Coach** of all drug and alcohol tests taken by me pursuant to the provisions of 49 CFR while in their employ. This includes any drug or alcohol screen completed by you, the applicant, for potential employment. I further release and agree to hold harmless each specifically listed previous or current employer as well as any employee, agent, or representative thereof from all liability or damage that may arise from the release of these results.
- 4) If employed, I agree to abide by and observe all Company rules and regulations. I consent and agree that **Easton Coach** has the right to search my personal property located on **Easton Coach** property along with **Easton Coach** desks, lockers, tool kits, etc., for the purpose of investigating possible violations of Company rules.
- 5) It is understood that an investigative consumer report pursuant to the Fair Credit Reporting Act may be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics, and way of living. By signing this application, I hereby consent to **Easton Coach** obtaining such a report.
- 6) I hereby authorize **Easton Coach** to obtain any medical documentation or information concerning my past or present medical history after a job offer is made and release all persons contacted from any liability or damages. I specifically authorize employers listed on page 2 or 3 of this application to release to **Easton Coach** any Drug and Medical test results.
- 7) I hereby authorize, without liability, any person or organization, including but not limited to any educational institution, training facility or any institution, whose name I have given as a reference, or by whom I have been previously employed, to furnish **Easton Coach** any information they may have concerning my employment or training to give such information to other companies and carriers requesting such information. I hereby release all such persons and organizations from any claims for damages of any kind, which may occur to me by reasons of furnishing such information. I hereby authorize any law enforcement agency or court of record to furnish **Easton Coach** information concerning my Motor Vehicle Record, or any felony or misdemeanor of which I have been convicted.

This certifies that I have personally completed this application, and that the information contained on this application is correct to the best of my knowledge. I understand that deliberate falsification of this information is grounds for dismissal in accordance with the policy of this organization.

Date \_\_\_\_\_ Applicant Signature **X** \_\_\_\_\_ Printed Name **X** \_\_\_\_\_