

PERSONAL PROFILE FORM – INTERVIEW

First name _____ Surname _____ Nationality _____

Telephone _____ e-mail _____

Previous professional experience (list your employers + period + position at the company)

1 _____

2 _____

Current employer _____

Are you registered at Job Office? YES/NO* since when _____

Possible starting date _____ for how long you can stay on truck(weeks/months) _____

Medical fitness certificate for driving C+E, valid till _____

Liability insurance YES/NO* Insurance company _____

Driving licence C since, E since, date _____

How you found us? _____

Expected salary + travel compensations _____

date: _____

Signature _____

PERSONAL PROFILE FORM – COMMENCING EMPLOYMENT

Date of birth _____ place of birth _____ personal no _____

Marital status _____ ID no _____ Driving licence no _____ ADR licence no _____

Permanent residence _____ ZIP _____

education _____ Health insurance company _____

Your children, for whom you get tax reduction:

Full name

date of birth

personal no

Do you collect any welfare, what kind _____

Your debts, solvency status _____

Bank account, Bank _____

Debit card - type _____

date: _____

Signature _____