



MODOC RAILROAD

Application for Internship Railroad Training

PRINT CLEARLY

Last Name _____ First Name _____ M .I. _____

Address: _____ City _____ State _____ ZIP _____

S.S.N. _____ / _____ / _____ HOME / CELL PHONE (_____) _____

Drivers License # _____ State _____ Any Restrictions? _____

Past Employer: _____ Duties _____

What are your long-term goals? _____

Do you have geographic employment restrictions or preferences? _____

1. Can you read, write and speak English clearly? Yes No
2. Are you a high school graduate or do you have a GED? Yes No
3. Do you have a current valid driver's license? Yes No
4. Have you been convicted for D.W.I. / D.U.I. or any alcohol or drug related offence? Yes No
When? _____
5. Is your vision correctable to 20/40? Yes No
6. Have you ever been employed in a safety sensitive position before? Yes No
7. Are you color blind? Yes No
8. Do you have any hearing problems? Yes No
9. Do you take any type of prescribed medication? Yes No
10. Do you have or have you had any back injuries? Yes No
11. Are you presently employed either part time or full time? Yes No
12. Can you verify employment / education history for last five years? Yes No
13. Can you show proof of eligibility to work in the United States? Yes No
14. Have you sustained an on the job injury and/or been paid worker's compensation? Yes No
15. Will you agree to a random drug test? Yes No
16. Are you under indictment, probation or charged with any crime? Yes No
17. Have you been convicted of any crime or felony within the past 7 years? Yes No
If yes, please describe: _____
18. Do you have shortness of breath? Yes No
19. Are you able to work, nights and weekends? Yes No
20. Do you have any religious restrictions that would affect an on duty work schedule? Yes No
21. Are you able to re-locate? Yes No
22. Are you able to lift sixty pounds? Yes No Can you climb a ladder 10 feet tall? Yes No
23. Do you have any friend or relative currently working for a railroad? Yes No
If yes, please describe: _____
24. Have you had any wrist or ankle injury? Yes No
If yes, please describe: _____
25. Do you understand that you would be subject to the laws and regulations of the Dept. of Transportation, Dept. of Homeland Security and Transportation Security Agency? Violation of those rules and regulations could be punishable by fines, civil and/or criminal penalties? Yes No

I declare the above information is true and accurate.

Applicant Signature: _____ Date _____

Railroad action taken: _____ Officer Name _____ Date _____

Mail your complete application plus a non-refundable \$100 processing fee to:
Modoc Railroad - P.O. 325 - Marion, Illinois 62959