

# APPLICATION FOR EMPLOYMENT

Position Desired \_\_\_\_\_  Full Time  Part Time Date \_\_\_\_\_

## WE ARE AN EQUAL OPPORTUNITY EMPLOYER APPLICANT'S STATEMENT

I understand that this application will be given every consideration, but it is not a promise of employment.

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at any time with or without notice, and the Company has the same right. No one other than the President of the Company has authority to modify this relationship or to make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the Company reserves the right to require me to submit to a test for the presence of drugs in my system prior to employment and at any time during my employment, to the extent permitted by law. I also understand that any offer of employment may be contingent upon the passing of a physical examination, and a test for the presence of alcohol in my system, performed by a doctor selected by the Company. Further, I understand that at any time after I am hired, the Company may require me to submit to a physical examination, and an alcohol test, to the extent permitted by law. I consent to the disclosure of the results of the physical examinations and related tests to the Company. I also understand that I may be required to take other tests, such as personality and honesty tests, prior to employment and during my employment.

I understand that the Company may investigate my driving record and my criminal record and that an investigative consumer report may be prepared whereby information is obtained through personal interviews with my neighbors, friends, and others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees, and representatives, as well as other individuals who release information to the Company, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me.

I hereby state that all of the information that I provide on this application and in any interview is true and accurate. I understand that if I am employed and any such information is later found to be false in any respect, I may be dismissed.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT**

\_\_\_\_\_  
Signature of Applicant

If employment is offered and accepted, such employment with \_\_\_\_\_ is based on mutual consent. You have the right to end your employment relationship with \_\_\_\_\_ at any time and for any reason. Similarly, the employment of any employee can be terminated at the sole discretion of \_\_\_\_\_ for any reason, at any time. It should also be understood that no supervisor or representative of \_\_\_\_\_, other than the \_\_\_\_\_ has the authority to enter into an agreement for employment for any specified period of time or to make any promises or commitments contrary to the terms as stated above. Further, any employment agreement entered into by the \_\_\_\_\_ shall not be enforceable unless it is in writing.

**PERSONAL DATA**

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
(Print) Last Name First Middle

Present Address \_\_\_\_\_ How long have you lived there? \_\_\_\_\_  
Street and Number City State Zip Years Months

Previous Address \_\_\_\_\_ How long did you live there? \_\_\_\_\_  
Street and Number City State Zip Years Months

Telephone Number \_\_\_\_\_ Are you 18 years of age or older?  Yes  No

Have you ever worked for this Company before?  Yes  No

If yes, please give dates and position: \_\_\_\_\_

Do you have any friends or relatives working here?  Yes  No If yes, Name: \_\_\_\_\_

Do you have a reliable means of transportation to travel to and from work which will allow you to consistently arrive at work on time?  Yes  No

If a driver's license is required for the position for which you are applying, do you have a valid driver's license?  
 Yes  No \_\_\_\_\_  
License No. State Expiration Date

Have you been cited for a traffic violation of any kind within the last FIVE years?  Yes  No  
 If yes, please give date and details: \_\_\_\_\_

**NOTE: An affirmative answer to the following question will not automatically disqualify you from consideration for the position for which you are applying. Factors such as age of the conviction, time of events, seriousness and nature of the violation, and rehabilitation are taken into account.**

Have you ever pled guilty or "no contest" to a crime or been convicted of a crime?  Yes  No  
 If yes, please give date and details of each: \_\_\_\_\_

Are you capable of satisfactorily performing the essential job duties required of the position for which you are applying?  Yes  No

**EDUCATION**

	Elementary					High				College/ University				Graduate/ Professional			
School Name																	
Years Completed:	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																	
Describe Course of Study or Major																	
Describe Specialized Training, Military Experience, Skills, and Extra-Curricular Activities																	

## RECORD OF PREVIOUS EMPLOYMENT

Please list the names of your previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references.

Name of Present or Last Employer	Employed	Pay	Your Title or Position	Reason for Leaving
Address	From (mo./yr.)	Start \$		
City, State, Zip Code	To (mo./yr.)	Final \$	Name of Last Supervisor	
Telephone				
Previous Employer	Employed	Pay	Your Title or Position	Reason for Leaving
Address	From (mo./yr.)	Start \$		
City, State, Zip Code	To (mo./yr.)	Final \$	Name of Last Supervisor	
Telephone				
Previous Employer	Employed	Pay	Your Title or Position	Reason for Leaving
Address	From (mo./yr.)	Start \$		
City, State, Zip Code	To (mo./yr.)	Final \$	Name of Last Supervisor	
Telephone				
Previous Employer	Employed	Pay	Your Title or Position	Reason for Leaving
Address	From (mo./yr.)	Start \$		
City, State, Zip Code	To (mo./yr.)	Final \$	Name of Last Supervisor	
Telephone				
Previous Employer	Employed	Pay	Your Title or Position	Reason for Leaving
Address	From (mo./yr.)	Start \$		
City, State, Zip Code	To (mo./yr.)	Final \$	Name of Last Supervisor	
Telephone				

Have you ever been terminated or asked to resign from any job?  Yes  No If yes, please explain circumstances: \_\_\_\_\_

Please explain fully any gaps in your employment history: \_\_\_\_\_

May we contact your current employer?  Yes  No If no, please explain: \_\_\_\_\_

**EMERGENCY INFORMATION**

In case of an accident or other emergency, who should we contact?

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (home) \_\_\_\_\_ Telephone (work) \_\_\_\_\_

Work Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**CHARACTER REFERENCES** Please list persons who know you well - Not previous employers or relatives

Name	Occupation	Address (Street, City and State)	Telephone Number	No. of Years Known

**ADDITIONAL INFORMATION** - Please indicate any actual experience you have in any of the following positions:

**OFFICE**

- Office Manager
- Bookkeeper
- Accounts Receivable
- Accounts Payable
- Payroll Clerk
- Tag/Title Clerk
- Warranty Clerk
- Data Entry
- Cashier

**SALES/LEASING**

- Sales Manager
- Sales Person (New Car)
- Sales Person (Used Car)
- Sales Person (Truck)
- F & I Manager
- Leasing Manager
- Fleet Manager
- Truck Manager
- Used Car Manager

**SERVICE AND REPAIR**

- Service Manager
- Service Writer/Advisor
- Dispatcher
- Shop Foreman
- Mechanic/Technician
- Electrician
- Helper
- Painter
- Body Repair
- Get Ready

**PARTS**

- Parts Manager
- Parts Counter
- Parts Stocker
- Parts Driver

**THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF THIRTY (30) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.**

**I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE AND ACCURATE.**

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of Applicant