

Application for Employment

PLEASE PRINT

Date: _____

Name: _____

Social Sec No. _____

Street

City

State

Zip Code

Business Telephone

Home Telephone

How were you referred to us?

Other

Newspaper

School

Current Employee

Agency

Name of referral source:

Please Note:

This application form was designed for use by applicants for various positions:clerical, professional, technical, and administrative. Answer the questions to the best of your ability. All information will be treated confidentially. **In completing this application, all candidates agree to resolve all disputes regarding this application for employment through the Company's Dispute Resolution Program.**

The issuance of this application in no way constitutes an employment agreement. The Company is an at-will employer and may hire, or terminate, with or without notice, for cause or without cause.

Failure to complete this application in its entirety may lead to rejection of the application by the Company. If the information supplied by the applicant is found to be false or misleading, the Company reserves the right to terminate the application process or the employee should you be hired.

EMPLOYMENT HISTORY

List present employer or most recent employer first.

May we contact these employers? Yes No

Employer	Employed From _____ mo/yr	Supervisor's Name
Address	To _____ mo/yr	Your Job Title
Your Salary		Duties
Start	End	
Reason for Leaving		

Employer		Employed	Supervisor's Name
		From _____ mo/yr	
Address		To _____ mo/yr	Your Job Title
Your Salary		Duties	
Start	End		

Reason for Leaving

Employer		Employed	Supervisor's Name
		From _____ mo/yr	
Address		To _____ mo/yr	Your Job Title
Your Salary		Duties	
Start	End		

Reason for Leaving

Employer		Employed	Supervisor's Name
		From _____ mo/yr	
Address		To _____ mo/yr	Your Job Title
Your Salary		Duties	
Start	End		

Reason for Leaving

TYPE OF WORK DESIRED

Indicate the position for which you are applying

Do you wish to work

Full-time Part-Time Temporarily

If part-time, specify hours or days:

What is your minimum *weekly* salary requirement?

Date available for work :

Do you have any commitments to another employer that may affect your employment with us?

SKILLS

Typing Speed _____ Words per minute

Steno Speed _____ Words per minute

Can you transcribe machine dictation?

Business machines you can operate :

Other

EDUCATION

	Print Name and Address for each School Listing	No. of Years Completed	Degree, Major or Type of Course
College			
Graduate School			
Trade, Business, Night or Correspondence			
Other			

MILITARY EXPERIENCE

Were you in the U.S. Armed Forces? Yes No

If so, what branch?

Dates of Duty: From _____ To _____

Rank at separation : _____

Briefly Describe Your Duties :

GENERAL INFORMATION

Are you legally authorized to work in the United States? Yes No

Are you below the age of eighteen? Yes No

Do you know of any reason why you cannot perform the essential functions of the job for which you are applying with or without reasonable accommodations?

Yes No

Please describe any accommodations required:

Have you ever been convicted of a criminal offense? Yes No

Date _____ Place _____

Nature :

(An affirmative answer will not automatically disqualify you from being considered as a candidate for employment)

Have you previously applied for employment here? Yes No If yes, When?

Have you previously been employed by this company or its subsidiaries? Yes

No

If yes, When? _____

GENERAL INFORMATION (Actual experience in any of the following, please circle.

REPAIR AND SERVICE DEPARTMENT

Service Manager	Body Person
Shop Foreman	Motorcycle
Paint Person	Car Washer
Machinist	Helper
Lube Person	Mechanic
Radio	Porter
Mech. Helper	Trimmer (Upholstry)
Janitor	Electrician
Polisher	

PARTS DEPARTMENT

Parts Manager Parts Clerk Parts Delivery

SALES DEPARTMENT

Sales Manager Truck Sales New Car Sales

Fleet Sales Used Car Sales F&I Manager

OFFICE

Office Manager Bookkeeper Cashier

Secretary-Stenographer Clerk

REFERENCES (Not Employers or Relatives, List at least three)

Name	Address	Occupation	Phone

Please include any other information you think would be helpful to us in considering you for employment, such as additional work experience, articles, books published, activities, accomplishments, etc. (You may exclude all information indicative of age, sex, race, religion, color, national origin or disability).

APPLICANT'S CERTIFICATION:

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information is a ground for dismissal. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing them to you. I agree to conform to the rules and regulations of the Company. I understand that if an offer of employment is extended, that it is conditioned upon 1) completing the Federal I - 9 form and providing documents establishing identity and work authorization, 2) successful completion of a pre-employment drug screening, and 3) acceptable results on a criminal background check as well as a credit check. I understand that my employment can be terminated with or without cause and with or without notice, at any time, at the option of either the company or myself. I understand that no manager or representative of the Company, other than the president, has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing. I further understand that the Company has implemented an Alternative Dispute Resolution Program and that any and all disputes that I may have while employed or after I leave my employment with this Company must be settled through mediation or arbitration. I agree to accept all the above terms and conditions of employment.

Signature: _____

Date: _____