

APPLICATION FOR EMPLOYMENT
 (PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION *required fields

*DATE _____

*SOCIAL SECURITY NO. _____

*Name

LAST FIRST MIDDLE

*Present Address

STREET CITY STATE ZIP

*Permanent Address

STREET CITY STATE ZIP

*Phone No.

Email:

*Are You 18 Years Or Older?

Yes No

For Online Application Submission Confirmation Use Only.

*Are You Prevented From Lawfully Becoming Employed
 In This Country Because Of Visa Or Immigration Status?

Yes No

EMPLOYMENT DESIRED

Position

Date You
Can Start

Desired
Salary Range

Are You Employed Now?

If So May We Inquire
Of Your Present Employer?

Ever Applied To This Company Before?

Where?

When?

Referred By

EDUCATION

NAME AND LOCATION OF SCHOOL

*NO. OF
YEARS
ATTENDED

*DID YOU
GRADUATE

SUBJECTS STUDIED

GRAMMAR SCHOOL

HIGH SCHOOL

COLLEGE

TRADE, BUSINESS OR
CORRESPONDENCE
SCHOOL

GENERAL

Subjects Of Special Study Or Research Work

Special Skills

Microsoft Office

Accounting Skills

Website Expertise

Word Processing

Clerical Skills

Management Experience

Service Experience

Parts Experience

Sales Experience

Service Advisor

Activities: (Civic, Athletic, Etc.)

EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS

U.S. Military or
Naval Service

Rank

Present Membership In
National Guard Or Reserves

Do You Have A Good Driving Record? Y N

Any Violations In The Last 3 Months? Y N

*This form has been revised to comply with the provisions of the American with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26, 1991.

GENERAL (contd.)

What are you available to work? Full Time Part Time

Are you a citizen of the United States? Yes No If no, are you authorized to work in the U.S? Yes No

Have you ever worked for this company? Yes No If so, when?

Have you ever been convicted of a felony? Yes No If so, please explain.

If employed and under 18, can you furnish a work permit? Yes No

FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

WHICH OF THESE JOBS DID YOU LIKE BEST?

WHAT DID YOU LIKE MOST ABOUT THIS JOB?

REFERENCES GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1			
2			
3			

IN CASE OF EMERGENCY NOTIFY

NAME ADDRESS PHONE NO.

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING."

DATE SIGNATURE

(Submitting application online via www.noteboomimplement.com will not require a physical signature. However you are agreeing that all information is correct)