

APPLICATION FOR EMPLOYMENT

Name:				
Position Applying For:				
Date://				

EQUAL OPPORTUNITY EMPLOYER

CITY GARAGE IS AN EQUAL OPPORTUNITY EMPLOYER. APPLICANTS ARE NOT REQUIRED TO PROVIDE ANY INFORMATION PROHIBITED BY LAW.

OUR EMPLOYMENT POLICIES AND PRACTICES ARE NON-DISCRIMINATORY REGARDING RACE, COLOR, NATIONAL ORIGIN, SEX, RELIGION, AGE, HANDICAPPED OR DISABLED VETERAN STATUS.

NAM	E:	(Last)	(Fire	st)	(Middle)	SOCIAL SECURITY NO.:		
ADDRESS:		(Street) (City)		(State)	(Zip)	PHONE NO.:		
EMA	EMAIL ADDRESS:							
	ARE YOU AT LEAST 18 YEARS OLD? YESNO							
	HAVE YOU EVER BEEN CONVICTED OF A FELONY?YESNO							
AL	DO YOU HAVE THE LEGAL RIGHT TO WORK IN THE UNITED STATES? YES NO							
N	INDICATE TYPE OF VISA:							
PERSONA	HAVE YOU EVER BEEN KNOWN BY ANY OTHER LAST NAME?NOYES, NAME:							
PE]	HOW SO	HOW SOON AFTER ACCEPTING AN OFFER WOULD YOU BE ABLE TO START?						
		NAL INTERESTS (i.e., Hobbies, Spo						
		(,,	,)				
	I	NAME:			GRADUA OR HIGH	TED? YES NO EST LEVEL		
Z	HIGH	LOCATION:			DATES A	TTENDED FROM: Mo. Yr.		
10		NAME				Yr		
CAJ	Y JATE ired)	NAME:			GRADUA OR HIGH	TED? YES NO EST LEVEL DATE:		
EDUCATION	UNIVERSITY UNDERGRADUATE (Transcript Desired)	LOCATION:			DATES A	TTENDED FROM: MoYr		
Ξ		DEGREE OR CERTIFICATE:	MAJOR & MINOR	COURSE OF STUDY:		Yr GPA OVERALL/MAJOR		
	UNI TT)							
	-		,					
7	NAME:					DATES ATTENDED FROM: Mo. Yr.		
EDUCATION	OTHER, TRADE TECHNICAL, MILITARY			TO: Mo.	TO: Mo Yr			
		LOCATION:			FROM: M	TTENDED: o Yr		
		DEGREE OR CERTIFICATE:	MAJOR & MINO	R COURSE OF STUD	TO: Mo Y:	Yr GPA OVERALL/MAJOR		
豆								
(-)		YOU ARE REQUIRED TO TEST DRIVE CUSTOMER VEHICLES, USE YOUR PERSONAL OR COMPANY VEHICLE TO CONDUCT COMPANY BUSINESS, THEREFORE						
LICENSE	YOU WILL NEED A VALID TEXAS DRIVER'S LICENSE. DO YOU HAVE A VALID TEXAS DRIVER'S LICENSE? NO. 16 VES. DRIDGATE							
ICE	DO YOU HAVE A VALID TEXAS DRIVER'S LICENSE? YES NO IF YES, INDICATE ((NUMBER)							
	DO YOU	DO YOU HAVE AUTOMOBILE LIABILITY INSURANCE? YES NO						

	START WITH PRESENT OR MOST RECENT EMPLOYER: - IF YOU HAVE A CURRENT RESUME', PLEASE ATTACH					H	
	COMPANY NAME:			ADDRESS	:	PH	IONE:
	DATES EMPLOYED:	POSITI	ON HELD/RESPON	NSIBILITIE	SS:		
	REASON FOR LEAVING					NAME OF SUPERVISOR:	
EXPERIENCE	COMPANY NAME:			ADDRESS	:	PH	IONE:
	DATES EMPLOYED:	POSITION	ON HELD/RESPON	NSIBILITIE	S:		
	REASON FOR LEAVING					NAME OF SUPERVISOR:	NAME OF SUPERVISOR:
	COMPANY NAME: ADDRESS:			PF	PHONE:		
	DATES EMPLOYED:	POSITI	ON HELD/RESPON	NSIBILITIE	25:		
	REASON FOR LEAVING					NAME OF SUPERVISOR:	
W	WHAT OTHER EXPERIENCES, SKI	LLS OR TR	AINING DO YOU	HAVE WH	ICH YOU FEEL WOULD Q	UALIFY YOU TO WORK FOR CITY (GARAGE?
_							
_							
—	WERE YOU IN THE ARMED FO	ORCES?	BRANCH OF SI	ERVICE:		RESERVE STATUS:	SUMMER
AR						ACTIVE INACTIVE	CAMP. REQ'D
MILITARY	DATE OF ENTRY:	STAI	RTING RANK:		DATE OF DISCHARGE:	RANK AT DISCHARGE:	
M							
DO YOU HAVE ANY PHYSICAL CONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECTION OF THE SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR SECONDITION WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB APPLIED FOR THE THE JOB APPLIED					THE JOB APPLIED FOR? YES	SNO	
EDI	IF YES, EXPLAIN:						
Σ	QUALIFIED HANDICAPPED AI	PLICANIS	ARE INVITED TO	VOLUNI	ARILI IDENTIFI THEMS	ELVES	
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LION	ASE CERTIFICATION? YES NO LIST CERTIFICATION LEVELS:			REFRIGERANT RECOVERY & RECYCLING CERTIFICATE: YES NO			
[CA]	OTHER CERTIFICATIONS:						
ERTIFICATIONS				OTHER	TRAINING:		
CER							

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF CITY GARAGE AND UNDERSTAND THAT MY EMPLOYMENT BY THE COMPANY MAY BE TERMINATED FOR ANY REASON THAT IS NOT PROHIBITED BY LAW. I UNDERSTAND THAT NO MANAGER OR ANY REPRESENTATIVE OF CITY GARAGE, OTHER THAN THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING. I
UNDERSTAND THAT I AM PROHIBITED FROM RELEASING TO ANY OTHER PARTY ANY INFORMATION WHATSOEVER ABOUT CITY GARAGE WHICH IS OF A CONFIDENTIAL NATURE OR WHICH COULD BE DEEMED TO CONSTITUTE A "TRADE SECRET" OR FROM USING, IN ANY MANNE
WHATSOEVER, INFORMATION WHICH IS CONFIDENTIAL, PROPRIETARY, OR PRIVILEDGED, WHETHER FOR PERSONAL BENEFIT OR GAIN, OR FOR THAT OF ANY OTHER PERSON. ANY INFORMATION, WHICH HAS NOT BEEN DISCLOSED PUBLICLY IN WRITING, WILL BE TREATED AS
CONFIDENTIAL.
I DECLARE MY ANSWERS TO THE QUESTIONS ON THIS APPLICATION ARE TRUE, AND GIVE CITY GARAGE AND ITS AFFILIATES THE RIGHT TO
INVESTIGATE ALL INFORMATION GIVEN AND TO SECURE ADDITIONAL INFORMATION, IF NECESSARY. I UNDERSTAND THAT AN
INVESTIGATIVE REPORT MAY BE MADE WHEREBY INFORMATION IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH THIRD PARTIES.

I DECLARE MY ANSWERS TO THE QUESTIONS ON THIS APPLICATION ARE TRUE, AND GIVE CITY GARAGE AND ITS AFFILIATES THE RIGHT TO INVESTIGATE ALL INFORMATION GIVEN AND TO SECURE ADDITIONAL INFORMATION, IF NECESSARY. I UNDERSTAND THAT AN INVESTIGATIVE REPORT MAY BE MADE WHEREBY INFORMATION IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH THIRD PARTIES, SUCH AS FAMILY MEMBERS, BUSINESS ASSOCIATES, FINANCIAL SOURCES, FRIENDS, NEIGHBORS OR OTHERS WITH WHOM I AM ACQUAINTED. I UNDERSTAND THAT THIS INQUIRY INCLUDES INFORMATION AS TO MY CHARACTER, GENERAL REPUTATION, AND/OR PERSONAL CHARACTERISTICS. WHICHEVER MAY BE APPLICABLE. THIS INFORMATION MAY INCLUDE, BUT IS NOT LIMITED TO VERIFICATION OF PREVIOUS EMPLOYMENT AND EMPLOYMENT REFERENCES, VERIFICATION OF EDUCATION INCLUDING REQUESTS FOR TRANSCRIPTS, CREDIT REPORTS, MOTOR VEHICLE DRIVING RECORDS AND CRIMINAL REPORTS, ETC. I HAVE THE RIGHT TO MAKE A WRITTEN REQUEST WITHIN A REASONABLE PERIOD OF TIME FOR A COMPLETE AND ACCURATE DISCLOSURE OF ADDITIONAL INFORMATION CONCERNING THE NATURE AND SCOPE OF THE INVESTIGATION. IN ACCORDANCE WITH THE LAW, I HEREBY RELEASE CITY GARAGE, ITS EMPLOYEES, AGENTS AND AFFILIATES, AND ALL OTHER PERSONS, COMPANIES OR CORPORATIONS FROM ALL LIABILITY OR RESPONSIBILITY FOR ANY DAMAGE THAT MAY ARISE FROM SUCH AN INVESTIGATION OR THE FURNISHING OF INFORMATION PURSUANT THERETO.

I FURTHER UNDERSTAND THAT ANY MISLEADING OR INCORRECT STATEMENTS OR THE INCOMPLETE FILLING OUT OF THE APPLICATION MAY RENDER THIS APPLICATION VOID AND, IF EMPLOYED, MAY BE CAUSE FOR IMMEDIATE DISCHARGE.				
MAT READER THIS AT EICATION VOID AND, II EMILEOTED, MAT BE CAUSE FOR IMMEDIATE	DISCHARGE.			
Signature of Applicant	Date			