

Date:

# APPLICATION FOR EMPLOYMENT

Position Desired	<ul><li>Full Time</li><li>Part Time</li></ul>	Salary Desired	Date Available
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#### PRE-EMPLOYMENT QUESTIONNAIRE

WEAREAN EQUAL OPPORTUNITY EMPLOYER APPLICANT'S STATEMENT

lunderstand that this application will be given every consideration, but 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 medical examination, including a drug/alcohol test, prior to employment and at any time during my employment, to the extent permitted by law. I also understand that I may be re-quired to take other tests, such as personality and honesty tests, prior to employment and during my employment.

I hereby state that all 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

Last Name	First	Name	MI	Home Phone	Cell Phone
esent Address					
ty	State	Zip	How Long	g Have You Lived At This A	ddress?
evious Address (If Less Than 5	Years)				
ty	State	Zip	How Long	g Did You Live At This Add	ress?
ho Referred You To Sax Motor		□ Friend □ Wa	lk-In □ Other	(Please List)	
e you 18 years of age or older? ave you ever worked for Sax Mo		-	, please give dat	tes & position(s):	
you have friends or relatives v you have any means of transp	vorking here? 🛛 🗆 Yes	□ No If yes	, Name:	Relationship:	
valid driver's license is required verse is required verse is required verse?	l for employment. Do you	🗆 Yes 🛛 N	0 <u> </u>	icense State Exp.Da	te
ave you ever been found guilty	of a traffic violation withi	n the last five ye	ears? 🗆 Ye	es 🗌 No 🛛 If yes, please	give dates and details:

# **Employment History**

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

Employer	Emplo	yment	Your Title or Position	Reason for Leaving		
	From (Mo/Yr)	To (Mo/Yr)		Reason for Leaving		
Address						
City, State, Zip Code	P	ay	Name of Last Supervisor			
	Starting	Current	Name of Last Supervisor			
Telephone	\$	\$				
( )						

Employer	Emplo	yment	Your Title or Position	Reason for Leaving
	From (Mo/Yr)	To (Mo/Yr)		Reason to Leaving
Address				
City, State, Zip Code	P	ay	Name of Last Supervisor	
	Starting	Ending	Name of Last Supervisor	
Telephone	\$	\$		
( )				

Employer	Employ From (Mo/Yr)	1	Your Title or Position	Reason for Leaving
Address				
City, State, Zip Code	Pay		Name of Last Supervisor	
	Starting	Ending	Name of Last Supervisor	
Telephone	\$	\$		
( )				

Employer	Employ From (Mo/Yr)		Your Title or Position	Reason for Leaving
Address				
City, State, Zip Code	Pa	ay	Name of Last Supervisor	
	Starting	Ending	Name of Last Supervisor	
Telephone	\$	\$		
( )				

Employer	Employ From (Mo/Yr)	í	Your Title or Position	Reason for Leaving
Address				
City, State, Zip Code	P	ay	Name of Last Supervisor	
	Starting	Ending	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

# **Educational Background**

		Elei	mer	ntary	/		High	Schoo	ol	Coll	ege/l	Jnive	rsity	Grad	uate/F	Profes	sional
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, Special																	
Skills and Extracurricular Activities, Honors																	
and Awards																	

### General Information (For additional information use a separate sheet)

List all computer programs in which you are proficient:			
Are you available to work on weekends or evenings if necessary?	🗆 Yes 🛛 No		
Are you willing to work overtime if required?			
Will you require any special adaptations to perform for the position for which you	are applying?	□Yes □No	
Have you failed a pre-employment drug screen or been convicted for the use or sale of a	drugs within the last TWO years	□Yes □No	
Additional comments concerning above information:			

# EMERGENCY INFORMATION In case of an accident or other emergency, who should we contact? Name: Relationship Home Address: Relationship Street City State Other Phone: Employer

## **Character References**

Please list all persons who know you well - Not previous employers or relatives

Name	Occupation	Address	Phone	Years Known

Additional Information - Please indicate where you have actual experiences in any of the following positions:

#### OFFICE

- Office Manager
- Bookkeeper
- □ Accounts Receivable
- Accounts Payable
- Payroll Clerk
   Tag /Title Clerk
- Tag/Title Clerk
- Warranty ClerkData Entry
- Data En
   Cashier
- Cashiel
   Receptionist
- Reception
   Other

#### SALES/LEASING

- Sales ManagerSales Person (New Vehicle)
- □ Sales Person (Used Vehicle)
- Sales Person (Commercial Vehicle)
- □ F&I Manager
- □ Leasing Manager
- □ Fleet Manager
- Truck Manager
- □ Used Vehicle Manager
- RentalsOther

#### **SERVICE & REPAIR**

- Service Manager
- Service Writer/Advisor
- Dispatcher
- Shop Foreman
- □ Mechanic/Technician
- Electrician
- Machinist
- Painter
- Body RepairMake Ready

#### PARTS

- Parts Manager
- Parts Counter
- Parts Stocker
- Parts Driver
- Derter/Janitor
- □ Security
- Driver/Messenger
- □ Maintenance
- □ Shipping & Receiving
- □ Other \_

DO NOT WRITE IN THIS SPACE - FOR INTERVIEWER'S USE ONLY								
Interviewed By:		Date:						
Comments:								
DATE HIRED	FOR POSITION		FOR DEPARTMENT					
STARTING WAGES		SUPERVISO	DR TO REPORT TO					

# 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.

#### ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK

I acknowledge receipt of the separate document entitled **DISCLOSURE REGARDING BACKGROUND INVESTIGATION** and **A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT** and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by Sax Motor Co. at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **Verified First, 1550 South Tech Lane, Suite 200, Meridian, Idaho 83642; Tel. # 1-888-670-9564; www.VerifiedFirst.com and/or Employer.** I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

#### PLEASE COMPLETE ALL FIELDS BELOW

Last Name		First Name	Middle Name	check box if no middle name
Social Security Number* ###-##-##	##	Date of Birth* month/date/year	Email Address required	
Driver's License Number	Issuing State*	Former Names/Aliases separate aliases with comma		

#### **CURRENT ADDRESS**

FORMER EMPLOYER

Street		Apt/Unit	Company	City, State
City	State	Zip	Position	Dates of Employment

\*This information will be used for background screening purposes only and will not be used as hiring criteria.

#### DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Sax Motor Co. ("the Company") may obtain information about you from a third party consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living. These reports may contain information regarding your criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks.

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you and to request a copy of your report. These searches will be conducted by **Verified First, 1550 South Tech Lane, Suite 200, Meridian, Idaho 83642; Tel. # 888.670.9564;** <u>www.verifiedfirst.com</u>. The scope of this disclosure allows the Company to obtain consumer reports now and throughout the course of your employment for an employment purpose to the extent permitted by law.