

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.

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, 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 my 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

Name of Applicant

Signature of Applicant

SOLICITUD DE EMPLEO

Posicion Deseada _____ Tiempo Completo _____ Tiempo Medio _____ Fecha: _____

SOMOS PATRONES DE OPORTUNIDAD IGUAL DECLARACION DEL SOLICITANTE

Yo comprendo que esta solicitud de empleo no es, y no es la intención de ser, un contrato ni promesa de empleo.

Tengo entendido que si me emplean, mi empleo no sera por periodo definitivo, sin hacer caso al tiempo de pago de mis salarios. Yo comprendo que mi empleo es voluntario, que tengo la libertad de renunciar en cualquier momento, con o sin aviso. Yo comprendo que ningun representante o supervisor de la Compañia, con la excepción de el Presidente, tiene la autorizacion de entrar en un acuerdo para empleo por cualquier periodo de tiempo especifico o de llegar a un acuerdo contrario a este. Todo tipo de modificación o acuerdo debe ser hecho por escrito.

Tengo entendido que la Compañia reserva el derecho de pedir que me someta a un examen par aver si hay evidencia de drogas en mi cuerpo antes de emplearme y en cualquier momento durante me empleo, hasta el punto de que las leyes permitan. Tambien comprendo que cualquier oferta de empleo puede ser contingente con pasar un examen físico y un examen del alcohol para ver si hay evidencia de alcohol en mi cuerpo, dicho examen sera hecho por un medico seleccionado por la Compañia. Yo comprendo que en cualquier momento despues de que me hayan empleado, la Compañia podria exigir que me someta a un examen físico, y un analisis de alcohol, segun permitido por la ley. Yo le doy permiso a revelar los resultados de los examenes físicos y los analisis a la Compañia. Tambien comprendo que puedo ser requerido a tomar otras pruebas como pruebas de personalidad y honestidad, antes y durante mi empleo.

Yo comprendo que la Compañia puede investigar los datos de mi historial de manejo y criminales y que reporte investigativo puede ser preparado por medio del cual la informacion es obtenida a traves de entrevistas personales con mis vecinos, amistades, y otras personas con quien me relaciono. Esta investigación incluye informacion sobre mi caracter, reputacion general, características y modo de vivir. Comprendo que tengo el derecho de hacer una peticion por escrito dentro de un periodo de tiempo razonable para recibir informacion adicional y detallada sobre la clase y el objeto de esta investigacion. Ademas, comprendo que la Compañia puede comunicarse con mis patrones previos, y autorizo a esos patrones de divulgar a la Compañia todos los expedientes e informació pertinente a mi empleo con ellos. Ademas de autorizar la divulgacion de cualquier informacion con respecto a mi empleo, renuncio completamente cualquier derecho o reclamacion que tengo o podre tener contra mis patrones previos, sus agentess, empleados, y representantes, así como tambien otros individuos quienes divulgen informacion a la Compañia, y los libero de cualquier y toda responsabilidad legal, reclamos, o daños directos o indirectos que puedan resultar del uso, entrega o divulgacion de dicha infromacion a cualquier persona o partido, sin importer si dicha informacion es favorable o no para mi.

Yo confirmo y certifico que la información proveida anteriormente correcta y verdadera y a mi mayor conocimiento. Yo comprendo que la omission y/o la representación falsa de cualquier información dada en mi aplicacion y/o entrevista(s) sera causa para el despido inmediato.

NO FIRME HASTA QUE NO HAYA LEIDO COMPLETAMENTE ESTA DECLARACION

Nombre del Solicitante/Candidato

Firma del Solicitante/Candidato

PERSONAL DATA

Name _____ Social Security No. _____
 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 No. _____ Email Address _____

Have you ever worked for this company before? ____ Yes ____ No If yes, please give dates and position _____

Do you have any relatives working here? ____ Yes ____ No If yes, Name: _____

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

If a driver license is required for the position for which you are applying, do you have a valid driver license? ____ Yes ____ No

 Driver License Number State Expiration Date Are you 18 years of age or older? ____ Yes ____ No

Have you been cited for a traffic violation of any kind within the last five (5) years? ____ Yes ____ No If yes, please give dates and details below:

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 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 dates and details below:

How many days of work have you missed in the last three (3) years due to reasons other than paid holidays and vacation?

 Year No. of days

 Year No. of days

 Year No. of days

EDUCATION

Name of School, City & State:

 Elementary High College/University Graduate/Professional

Years Completed: (Circle) Elementary 4 5 6 7 8 High 9 10 11 12 College/University 1 2 3 4 Graduate/Professional 1 2 3 4

Did you receive a Diploma? ____ Yes ____ No Did you receive a Degree? ____ Yes ____ No Describe Course of Study or Major below:

Describe any specialized training, military experience, skills and extra-curricular activities below:

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 the name of your business and supply a business reference.

Name of Present or Last Employer _____ Employed From (mo./yr.) _____ To (mo./yr.) _____

Address _____ Pay: Starting \$ _____ Final \$ _____

Your Title or Position _____ Name of Last Supervisor _____ Phone Number _____

Reason for Leaving _____

Name of Previous Employer _____ Employed From (mo./yr.) _____ To (mo./yr.) _____

Address _____ Pay: Starting \$ _____ Final \$ _____

Your Title or Position _____ Name of Last Supervisor _____ Phone Number _____

Reason for Leaving _____

Name of Previous Employer _____ Employed From (mo./yr.) _____ To (mo./yr.) _____

Address _____ Pay: Starting \$ _____ Final \$ _____

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Address _____ Pay: Starting \$ _____ Final \$ _____

Your Title or Position _____ Name of Last Supervisor _____ Phone Number _____

Reason for Leaving _____

Name of Previous Employer _____ Employed From (mo./yr.) _____ To (mo./yr.) _____

Address _____ Pay: Starting \$ _____ Final \$ _____

Your Title or Position _____ Name of Last Supervisor _____ Phone Number _____

Reason for Leaving _____

Have you ever been terminated or asked to resign from any job _____ Yes _____ No If yes, please explain the circumstances below:

Please explain fully any gaps in your employment history below:

May we contact your current employer: _____ Yes _____ No If no, please explain below:

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 _____

Name: _____

Occupation: _____

Address (Street, City and State) _____

Telephone Number _____

No of Years known _____

Name: _____

Occupation: _____

Address (Street, City and State) _____

Telephone Number _____

No of Years known _____

ADDITIONAL INFORMATION

Please indicate the number of years of any actual experience you have in any of the following positions:

<u>OFFICE</u>	<u>SALES & LEASING</u>	<u>SERVICE & REPAIR</u>	<u>PARTS</u>
Office Manager _____	Sales Manager _____	Service Manager _____	Parts Manager _____
Bookkeeper _____	Sales Person (New car) _____	Service Writer/Advisor _____	Parts Counter _____
Accounts Receivable _____	Sales Person (Used car) _____	Dispatcher _____	Parts Stocker _____
Accounts Payable _____	Sales Person (Truck) _____	Shop Foreman _____	Parts Driver _____
Payroll Clerk _____	F & I Manager _____	Mechanic/Technician _____	<u>I.T.</u>
Tag/Title Clerk _____	Leasing Manager _____	Electrician _____	IT Manager _____
Warranty Clerk _____	Fleet Manager _____	Painter _____	Engineer _____
Data Entry _____	Truck Manager _____	Body Repair _____	Help Desk _____
Cashier _____	Used Car Manager _____	Detail/Make Ready _____	

List any other relevant job experience: _____

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 EMPLOYMENT APPLICATION IS TRUE AND ACCURATE.

Date

Signature of Applicant