

# High Gear Truck Repair

## APPLICATION FOR EMPLOYMENT — NON-EXEMPT POSITION

Applicant Name:      Last                      First                      Middle	Application Date:
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Present Address:	Street	City	State	Zip Code
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Telephone: (    )	Email Address:
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Are you 18 years old or older? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you either a U.S. citizen or an alien authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Have you ever worked or attended school under another name?  Yes  No    If so, under what name?

Have you ever been convicted of a crime?\*  Yes  No  
 If yes, give details, including date(s):

*\* A "yes" answer will not automatically disqualify you from employment. We will consider the nature and date of the offense and the job for which you are applying for job-related purposes only, and only to the extent permitted by applicable law.*

### PROFESSIONAL EXPERIENCE

Position:	Date you can start:	Salary desired:
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Are you available to work overtime?  Yes  No

Have you previously worked for this company?  Yes  No      If so, from \_\_\_\_\_ to \_\_\_\_\_  
 Reason for leaving:  
 Former supervisor(s) at this company:

How did you learn about this opening?

### EDUCATION

High School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
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Technical School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
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College/University:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
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Other education or training:  
 Other special skills:

### MILITARY SERVICE

Branch of Service:	Dates Served:	Rank at Discharge:
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Education and Training:

APPLICATION FOR EMPLOYMENT

PLEASE PRINT CLEARLY AND COMPLETELY. DO NOT WRITE IN THESE SPACES. ALL INFORMATION FURNISHED WILL BE KEPT ON FILE AND MAY BE USED FOR EMPLOYMENT PURPOSES.

<b>Employer:</b>		Address:	
From: _____ To: _____ Final Salary: _____	Position Held:	Reason for leaving:	
Supervisor's Name & Title:		May we contact? Yes <input type="checkbox"/> No	
Description of Duties:			
<b>Employer:</b>		Address:	
From: _____ To: _____ Final Salary: _____	Position Held:	Reason for leaving:	
Supervisor's Name & Title:		May we contact? Yes <input type="checkbox"/> No	
Description of Duties:			
<b>Employer:</b>		Address:	
From: _____ To: _____ Final Salary: _____	Position Held:	Reason for leaving:	
Supervisor's Name & Title:		May we contact? Yes <input type="checkbox"/> No	
Description of Duties:			

REFERENCES

<u>Name</u>	<u>Telephone Number</u>
1. _____	_____
2. _____	_____
3. _____	_____

**AUTHORIZATION AND ACKNOWLEDGMENTS**

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I am employed, any false statements on this application may be grounds for dismissal.

I authorize investigation of all statements contained in this application. I also grant permission to contact all references listed above, and authorize them to release all information concerning my previous employment and any other pertinent information these references might have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing this information to you.

I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time and without prior notice.

\_\_\_\_\_/\_\_\_\_\_  
Applicant Signature Date

**DO NOT WRITE BELOW:**

Interviewed By: \_\_\_\_\_ Date Reporting to Work: \_\_\_\_\_  
 Position: \_\_\_\_\_ Department: \_\_\_\_\_  
 Starting Salary: \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_  
Supervisor Signature Date