

Application For Employment

Personal Information

Name

| | | | | |
|---|---------------|--|-------|-----|
| Address | | City | State | Zip |
| Phone Number | Mobile Number | Email Address | | |
| Are You A U.S. Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/> | | Have you ever been convicted of a felony? If so, state the felony below: Yes <input type="checkbox"/> No <input type="checkbox"/> Felony: | | |

If Selected For Employment Are You Willing To Submit to a Pre-Employment Drug Screening Test?

Yes No

Are you older than 17 years? Yes / No

Are you older than 25 years? Yes / No

Are you able to provide a valid driver's license? Yes / No

If needed, can you lift over 50 lbs? Yes / No

Do you have reliable transportation to and from work? Yes / No

Are you bilingual? Yes / No

If yes, what languages do you speak?

Position

| | |
|-------------------------------|----------------------|
| Position You Are Applying For | Available Start Date |
|-------------------------------|----------------------|

Employment Desired

Full Time Part Time Seasonal/Temporary

Shift Availability

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|------|--------|---------|-----------|----------|--------|----------|--------|
| From | | | | | | | N/A |
| To | | | | | | | N/A |

Education

| School Name | Location | Years Attended | Degree Received | Major |
|-------------|----------|----------------|-----------------|-------|
| | | | | |
| | | | | |

Do you have any other skills or abilities which may help your position at the Oil Change Depot? If so, list them below.

References

| Name | Title | Company | Phone |
|------|-------|---------|-------|
| | | | |
| | | | |
| | | | |

Employment History

| | | |
|---------------------|-------------------|-----------------|
| Employer (1) | Job Title | Dates Employed |
| Work Phone | Starting Pay Rate | Ending Pay Rate |
| Address | City | State |
| | | Zip |
| Employer (2) | Job Title | Dates Employed |
| Work Phone | Starting Pay Rate | Ending Pay Rate |
| Address | City | State |
| | | Zip |
| Employer (3) | Job Title | Dates Employed |
| Work Phone | Starting Pay Rate | Ending Pay Rate |
| Address | City | State |
| | | Zip |

Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

| | |
|---------------------|-----------|
| Name (Please Print) | Signature |
| Date | |