

# APPLICATION FOR EMPLOYMENT

Scoggin-Dickey  
Chevrolet – Buick – Subaru

Position Desired: \_\_\_\_\_ Date: \_\_\_\_\_

## PLEASE READ BEFORE FILLING OUT APPLICATION

No question on this application is intended to secure information to be used for a discriminatory purpose, as this company is an equal employment opportunity employer and does not discriminate on the basis of race, color, religion, sex, citizenship, national origin, age, veteran, Reserve, National Guard, marital status, disability, or any other legally protected status.

### APPLICANT'S STATEMENT OF UNDERSTANDING AND AUTHORIZATION:

I understand that this application will be given every consideration, but its receipt does not imply that the applicant will be employed.

I understand and authorize the company to obtain a consumer report on my financial and credit record as well as an investigative consumer report whereby information is obtained through personal interviews with neighbors, friends, and others with whom I am acquainted. This investigation 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 investigative consumer report. I give my permission to the company to contact any of the former employers or references shown below to verify the information I have given and I authorize previous employers to release all records of my employment, including assessments of my job performance, ability, and fitness.

I understand that the company may require a Motor Vehicle Record (MVR) report.

I understand that the company reserves the right to require a conditional offer of employment medical examination as well as a periodic physical or medical examination, pre-employment as well as post-employment drug/alcohol test, to the extent permitted by law. I understand that a polygraph (lie detector) examination, to the extent permitted by law, may be given by the company during employment.

I hereby state that the information given by me in this application is true in all respects, and I agree that if I am employed and the information is found to be false in any respect that I may be dismissed.

Should I be employed I understand that such employment will not result in an employment contract for any specific term.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## I. PERSONAL DATA

Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
(PRINT) Last Name First Name Middle

Present Address: \_\_\_\_\_  
Street and Number City State Zip Code

Home or Nearest Telephone No.: \_\_\_\_\_ Emergency Phone No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you over the age of 18? Yes [ ] No [ ] If no, employment is subject to verification that applicant is of minimum legal age.

Are you legally authorized to work in the United States? Yes [ ] No [ ]

If a drivers license is required for the position for which you are applying, do you have a valid drivers license? Yes [ ] No [ ] \_\_\_\_\_  
State Number Expiration Date

**Personal Data Continued...**

Are there any restrictions on your driver's license? Yes [ ] No [ ]

Do you hold any other operator's permits? Yes [ ] No [ ]

Do you hold a commercial driver's license? Yes [ ] No [ ]

Have you ever been convicted of a felony, excluding a traffic violation? Yes [ ] No [ ]

A conviction does not automatically mean you will not offered a job. What you were convicted, the circumstances surrounding that conviction, and how long ago the conviction occurred, are important. Please give all the facts:

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If a driver's license is required for the position for which you are applying, have you ever been convicted of a DWI (Driving While Intoxicated) or a DUI (Driving Under the Influence)? Yes [ ] No [ ]

If yes, give a date and details of each conviction: \_\_\_\_\_

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Do you currently have more than ONE violation on your driving record? Please list what citations you have been issued within the last 3 years, that would show up on your driving record. \_\_\_\_\_

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If a surety bond is required for the position for which you are applying, have you ever been refused a surety bond? Yes [ ] No [ ] If yes, state the reason and date: \_\_\_\_\_

**II. EDUCATION**

List all education and training

<b>Classification</b>	<b>Name and Location</b>	<b>Major Studies</b>	<b>Diploma/Degree</b>
<b>College</b>			
<b>Business School</b>			
<b>Vocational</b>			
<b>High School</b>			
<b>Other</b>			

Please provide any additional information such as special skills, training, management experiences, equipment operation, or qualifications you feel will be helpful to us in considering your application:

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### III. CHARACTER REFERENCES

Name	Occupation	Address (Street, City, State)	Telephone Number	Number of Years Know

### IV. RECORD OF PREVIOUS EMPLOYMENT

List names of employers in consecutive order with present or last employer listed first. Account for any gaps and any period of unemployment. IF self-employed, give firm name and supply business references. PLEASE GIVE MONTH AND YEAR.

Name of Present or Last Employer	Employed	Pay Rate	Employee's Title	Reason for Leaving

Name of Present or Last Employer	Employed	Pay Rate	Employee's Title	Reason for Leaving

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Name of Present or Last Employer	Employed	Pay Rate	Employee's Title	Reason for Leaving

Name of Present or Last Employer	Employed	Pay Rate	Employee's Title	Reason for Leaving

Explain any gaps in your employment history set forth above: \_\_\_\_\_

If considered, how soon could you report to work: \_\_\_\_\_

Type of employment: [ ] Full Time [ ] Part Time [ ] Temporary Rate of pay expected? \_\_\_\_\_

What days and hours if part-time? Days \_\_\_\_\_ Hours \_\_\_\_\_

Are you presently employed? \_\_\_\_\_ If yes, why do you desire to make a change? \_\_\_\_\_

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How long have you worked in automobiles? \_\_\_\_\_ What makes of cars do you know best? \_\_\_\_\_  
\_\_\_\_\_ Have you been certified by the National Institute of Automotive Service Excellence (NIASE)? Yes [ ] No [ ] If yes, in what areas? \_\_\_\_\_

Have you ever worked for this company before? Yes [ ] No [ ] If yes, give dates and positions held: \_\_\_\_\_

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**V. GENERAL INFORMATION** - Actual experience in any of the following, please check.

REPAIR AND SERVICE

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|--|--|
| <input type="checkbox"/> Service Manager | <input type="checkbox"/> Body Person       |
| <input type="checkbox"/> Shop Foreman    | <input type="checkbox"/> Paint Person      |
| <input type="checkbox"/> Machinist       | <input type="checkbox"/> Helper            |
| <input type="checkbox"/> Mechanic        | <input type="checkbox"/> Radio             |
| <input type="checkbox"/> Mechanic Helper | <input type="checkbox"/> Trimmer/Upholster |
| <input type="checkbox"/> Electrician     | <input type="checkbox"/> Polisher          |

PARTS DEPARTMENT

- |   |   |
|---|---|
| <input type="checkbox"/> Motorcycle         | <input type="checkbox"/> Parts Manager  |
| <input type="checkbox"/> Car Washer         | <input type="checkbox"/> Parts Clerk    |
| <input type="checkbox"/> Lubrication Person | <input type="checkbox"/> Parts Delivery |
| <input type="checkbox"/> Porter             |   |
| <input type="checkbox"/> Janitor            |   |

SALES DEPARTMENT

- |   |  |
|---|--|
| <input type="checkbox"/> Sales Manager        | <input type="checkbox"/> Truck Salesperson             |
| <input type="checkbox"/> New Car Salesperson  | <input type="checkbox"/> Fleet Salesperson             |
| <input type="checkbox"/> Used Car Salesperson | <input type="checkbox"/> Finance and Insurance Manager |

OFFICE

- |   |                                |
|---|--------------------------------|
| <input type="checkbox"/> Office Manager           | <input type="checkbox"/> Clerk |
| <input type="checkbox"/> Bookkeeper               | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Secretary – Stenographer |                                |

**APPLICANT'S CERTIFICATION**

I certify that the information contained in the application is correct to the best of my knowledge and understand that falsification of this information is a ground for dismissal. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I agree to conform to the rules and regulations of the Company. I understand that if any offer of employment is extended that it is conditioned upon completing the Federal I-9 form and providing documents establishing identity and work authorization. I understand that my employment application and any other company documents are not promises of employment. I understand that my employment can be terminated without cause, at any time, at the option of either the company or myself. I understand that no manager or representative of the Company, other than the president, has the authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**APPLICANT: Do Not Write Below This Line  
RECORD OF EMPLOYMENT**

**Employed** \_\_\_\_\_ **Assigned**  
**to** \_\_\_\_\_  
(Date)

**Basis of Pay** \_\_\_\_\_

**USE THIS SPACE FOR HISTORY, JOB ASSIGNMENTS, PAY CHANGES, ETC.**

**REASON FOR TERMINATION**