Just Done Right
Mobile Detailing Specialist co
386-473-8189

APPLICATION FOR IMPLOYMENT

DATE:_____ S.S. #_____

The Civil Rights Act of 1964 prohibits discrimination of employment because of race, color, gender, religion or national origin. The Age Discrimination in Employment Act of 1967 prohibits discrimination of the basis of age with respect to individuals who are at least 40 years of age and other aspects of employment. The Americans with Disabilities Act of 1990 prohibits discrimination against qualified individuals with disabilities in the job application procedures.

PERSONAL INFORMATION

NAME _____
(LAST) (FIRST) (MIDDLE)

ADDRESS _____
(STREET) (CITY) (STATE) (ZIP)

ARE YOU LEGALLY ELIGIBLE FOR WORK IN THE UNITED STATES? YES NO ARE YOU 18 YEARS OR OLDER YES NO

POSITION APPLIED FOR _____ REFERRED BY _____

EVER APPLIED TO THIS COMPANY BEFORE? YES NO IF YES, WHEN? _____

WOULD YOU PREFER TO WORK FULL TIME PART TIME TEMPORARY DATE AVAILABLE _____

ARE YOU EMPLOYED NOW? YES NO SALARY DESIRED _____ PHONE: _____

DOES YOUR PRESENT EMPLOYER KNOW OF YOUR PLANS TO CHAGE EMPLOYMENT? YES NO

MAY WE CONTACT THE EMPLOYERS LISTED BELOW? YES NO IF NOT, INDICATE WHICH ONE(S) YOU DO NOT WISH US TO CONTACT. _____

PLEASE LIST ANY ADDITIONAL INFORMATION THAT RELATES TO YOUR ABILITY TO PERFORM THE JOB FOR WHICH YOU HAVE APPLIED, SUCH AS SPECIAL TRAINING, MACHINE OPTERATIONS, HOBBIES, LANGUAGES, ETC.

U.S. ARMED FORCES YES NO IF YES, BRANCH _____ RANK AT DISCHARGE _____

HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE PAST 7 YEARS? YES NO IF YES, PLEASE EXPLAIN:

_____ (CONVICTION WILL NOT NECESSARILY DISQUALIFY APPLICANT FOR EMPLOYMENT)

IN CASE OF EMERGENCY, NOTIFY: _____
(NAME)

(ADDRESS) (PHONE)

EDUCATION	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	GRADUATED	COURSE OR MAJOR
GRAMMAR SCHOOL			YES NO	
HIGH SCHOOL			YES NO	
COLLEGE			YES NO	
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL			YES NO	

(CONTINUED)

FORMER EMPLOYERS (LIST BELOW, LAST THREE EMPLOYERS, STARTING WITH THE LAST ONE FIRST)

1	EMPLOYER	DATES EMPLOYED		DUTIES
		FROM	TO	
	ADDRESS			
	TELEPHONE NUMBER(S)	HOURLY RATE/SALARY		
		STARTING	FINAL	
	JOB TITLE / SUPERVISOR			
	REASON FOR LEAVING			
2	EMPLOYER	DATES EMPLOYED		DUTIES
		FROM	TO	
	ADDRESS			
	TELEPHONE NUMBER(S)	HOURLY RATE/SALARY		
		STARTING	FINAL	
	JOB TITLE / SUPERVISOR			
	REASON FOR LEAVING			
3	EMPLOYER	DATES EMPLOYED		DUTIES
		FROM	TO	
	ADDRESS			
	TELEPHONE NUMBER(S)	HOURLY RATE/SALARY		
		STARTING	FINAL	
	JOB TITLE / SUPERVISOR			
	REASON FOR LEAVING			

REFERENCES: GIVE BELOW NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME AND ADDRESS	BUSINESS	PHONE	YEARS ACQUAINTED
NAME:			
STREET ADDRESS / CITY / STATE / ZIP			
NAME:			
STREET ADDRESS / CITY / STATE / ZIP			
NAME:			
STREET ADDRESS / CITY / STATE / ZIP			

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND/OR SALARY, BE TERMINATED AT ANY TIME.

DATE: SIGNATURE:

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: DATE:

REMARKS:

HIRED YES NO POSITION DATE REPORTING FOR WORK SALARY WAGES

APPROVED 1. 2. 3.

EMPLOYMENT MANAGER DEPT. HEAD GENERAL MANAGER