# EMPLOYMENT APPLICATION

Bob's Automotive 8317 Panama City Beach Pkwy Panama City Beach FL 32407

It is our policy to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or military service.

Please complete all sections and answer all questions. Incomplete applications will not be considered for an interview.

APPLICANT (Please print)
Name:
Street Address:
City/State/ Zip:
Years at this address? Home phone:
Cell phone:
Driver's license (State/Number):
Position applied for:
Wage desired: \$per
Have you applied with company previously? YES NO
If yes, when?
Are you at least 18 years old? YES NO
Are you legally eligible to work in the United States? YES NO
Have you ever been convicted of a felony or misdemeanor? YES NO
If yes, explain:
If you are offered employment, when are you available to start?
How will you get to work?
Are there any hours you are not able to work?
Are you able to perform the essential functions of the job position with or withou
reasonable accommodation? WITH WITHOUT
If with, what reasonable accommodation would you require?

## **EMPLOYMENT HISTORY** (Start with current or most recent employer first)

Company name:
Supervisor's name:
Street address:
City/State/Zip:
Job duties:
Reason for leaving:
Date of employment: From to
Company name:
Supervisor's name:
Street address:
City/State/Zip:
Job duties:
Reason for leaving:
Date of employment: From to
Company name:
Supervisor's name:
Street address:
City/State/Zip:
Job duties:
Reason for leaving:
Date of employment: From to
EDUCATION and TRAINING
High School name:
City/State:
Years you attended High School:
College name:
City/State:
Did you receive a degree? YES NO
If yes, what degree was earned?

#### EDUCATION and TRAINING (Continued)

Any other education or training:	
Awards, honors or special achievements:	
Licenses or certifications:	

#### OTHER

Please provide any other information you would like considered: \_\_\_\_\_

The information I have provided on this application is accurate and truthful. I understand that providing false or misleading information will be the basis for rejecting my application, or if employment commences immediate termination.

I authorize **Bob's Automotive** to contact former employers and educational institutions regarding my employment and education. I authorize my former employers and education institutions to fully and freely communicate information regarding my previous employment, attendance and grades.

APPLICANT'S SIGNATURE

DATE

### AUTHORIZATION FOR BACKGROUND CHECK

Your written authorization is necessary for completion of the application process.

I authorize **Bob's Automotive** to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that **Bob's Automotive** will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

Signature of Applicant

Date

Print Applicant's Name