



E M P L O Y M E N T A P P L I C A T I O N

We consider applicants for all positions without regards to race, color, religion, creed, gender, national origin, disability, marital status, sexual orientation or any other legally protected status.

(Please Print)

Positions(s) Applied For	Date of Application
How Did You Learn About Us?	
<input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Walk-in <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other _____	

Last Name	First Name	MI	Telephone #
ADDRESS		STREET	APT#
CITY	STATE	ZIP	SOCIAL SECURITY NUMBER

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you filed an application with us before? Yes No
 If Yes, give date _____

Have you ever been employed with us before? Yes No
 If Yes, give date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
 (Proof of citizenship or immigration status will be required upon employment) Yes No

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "Lay off" status and subject to recall? Yes No

Do you have a current, clean drivers license? Yes No

Have you been convicted of a felony within the last 7 years? Yes No
 Conviction will not necessarily disqualify an applicant from employment

If yes, please explain _____

Employment Experience

Start with your present or last job. Include any job related military service assignments and volunteer activities. You may exclude organizations which include race, color, religion, gender, national origin, disabilities or other legally protected status.

1.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
2.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
3.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
4.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status: _____

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
College				
College				
Other				

Describe any specialized training, apprenticeships, skills and extra-curricular activities.

Other Qualifications

Specialized Skills: Check Skills/Equipment Operated

Do You possess special tools or equipment that you will use at the shop?

	Notes / Brand
Working Scanner / Type	_____
Working Transmission Jack	_____
Transmission Pressure Gauges	_____
Dial Indicators / Differential Tools	_____
Other	_____

References

1.	()	
	(Name)	Phone#
2.	()	
	(Name)	Phone#
3.	()	
	(Name)	Phone#
4.	()	
	(Name)	Phone#
5.	()	
	(Name)	Phone#

Applicants Statement

I certify that answers given are true and complete to the best of my knowledge.

I authorize investigation of all statements contained on this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment beyond this period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless defined by applicable law, any employment relationship with **TRI-CITY TRANSMISSION** is of an "at will" nature, which means the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless change is specifically acknowledged in writing by an authorized executive of **TRI-CITY TRANSMISSION**.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all the rules and regulations of **TRI-CITY TRANSMISSION**.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

Interview Date

Employed Yes No

Date of Employment _____

Job Title _____ Salary _____ Department _____

By _____

NOTES
