

Classic Collision Inc

APPLICATION FOR EMPLOYMENT

Full Name: _____

Address: _____

City: _____ State: _____

Home Phone # _____ Cell Phone # _____

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

Are you 18 years old or older? Yes No

What position are you applying for? _____

If hired, when can you start work? _____

Have you ever been convicted of any felonys? Yes No

EDUCATION

High School

Name of School: _____

Location: _____

Area of study? _____

of years attended: _____ Did you graduate? Yes No

Trade School

Name of School: _____

Area of study? _____

Location: _____

of years attended: _____ Did you graduate? Yes No

College

Name of School: _____

Location: _____

Area of study? _____

of years attended: _____ Did you graduate? Yes No

Other

Name of School: _____

Location: _____

Area of study? _____

of years attended: _____ Did you graduate? Yes No

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EMPLOYMENT HISTORY

Beginning with your most recent employment and working back in time, please give the following information:

Employer 1

Employer: _____

Address: _____

Phone #: _____

May we contact? Yes No

Job Title: _____

Duties: _____

Dates of Employment: From: _____ To: _____

Supervisor: _____

Reason for Leaving: _____

Employer 2

Employer: _____

Address: _____

Phone #: _____

May we contact? Yes No

Job Title: _____

Duties: _____

Dates of Employment: From: _____ To: _____

Supervisor: _____

Reason for Leaving: _____

Employer 3

Employer: _____

Address: _____

Phone #: _____

May we contact? Yes No

Job Title: _____

Duties: _____

Dates of Employment: From: _____ To: _____

Supervisor: _____

Reason for Leaving: _____

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PERSONAL REFERENCES

Please provide the names of two references who have not employed you and are not related to you.

Reference 1

Name: _____

Phone #: _____

Relationship: _____

Reference 2

Name: _____

Phone #: _____

Relationship: _____

ADDITIONAL QUALIFICATIONS

Please tell us about other training, educations, skills or achievements that you feel should be considered.

I certify and declare under penalty of perjury under relevant state and federal law that the information contained in my employment application is complete, true and accurate. I acknowledge that falsification or omission of information may result in immediate dismissal or retraction of any offer of employment.

Applicant's Name (Please Print)

Applicant's Signature

Date