

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE



APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE PAGES 1-4.

Date of Application: _____

Name				
Last	First	Middle	Maiden	
Present Address				
Number	Street	City	State	Zip Code
How long at Address _____		Social Security No. _____		
Telephone Number () _____	If under 21, please list age _____			
Position applied for (1) _____	Days/hours available to work			
Position applied for (2) _____	No Pref		Thur	
Salary Desired _____	Mon		Fri	
(Be Specific)	Tue		Sat	
	Wed		Sun	
How Many Hours Can You Work Weekly? _____		Can You Work Nights? _____		
Employment Desired <input type="checkbox"/> Full Time Only <input type="checkbox"/> Part Time Only <input type="checkbox"/> Full or Part Time				
When Available for Work ? _____				
Type of School	Name of School	Location (Complete mailing address)	Number of Years Completed	Major & Degree
High School				
College				
Bus. Or Trade School				
Professional School				

Have you ever been Convicted of a Crime? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation _____



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WORK HISTORY

List all of your work experience beginning with your most recent job. Complete all information and include no less than 5 years work history. If you were self-employed, include company name. Attach additional sheets if necessary.

Name of Employer	Name of last supervisor	Employment Dates	Pay or Salary
Address		From	Start
City, State, Zip Code		To	Final
Phone Number	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of Employer	Name of last supervisor	Employment Dates	Pay or Salary
Address		From	Start
City, State, Zip Code		To	Final
Phone Number	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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Name of Employer	Name of last supervisor	Employment Dates	Pay or Salary
Address		From	Start
City, State, Zip Code		To	Final
Phone Number	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			



APPLICATION FORM WAIVER

PLEASE READ CAREFULLY

In exchange, for the consideration of my job application by, **Smyth Automotive, Inc.** (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or confer any right to remain an employee of the Company. The employment-at-will relationship between Company and the undersigned, cannot be altered except by a written instrument signed by the President of the Company. Both the undersigned and the Company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits; policies and procedures, responsibilities and such changes may include reduction in benefits.

I also understand that (1) the Company has a drug and alcohol policy that allows random testing of the employees; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of my employment application, the Company will also seek a background check including but not limited to criminal background history. Information regarding this background check will be provided in separate documentations.

I further understand, my employment relation with the Company is terminable at will for any reason by either party.

I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice.

Signature of applicant _____

Date _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.