



COLLISION REPAIR

Employment Application

Personal Data

Name:

Date:

Position Applying For:

Social Security Number:

Address:

City:

State:

Zip

Home Phone:

Message Phone:

Do you have a valid driver's license? **Yes** **No**

License No.

Exp. Date:

Do you have adequate transportation to and from work? **Yes** **No**

Have you been cited for a traffic violation of any kind within the last FIVE years? **Yes** **No**

If yes, please give date and details:

Who were you referred by?

Education

Education	High School	College	Vocation/Technical School
School Name			
Years Completed: (Circle)	9 10 11 12	1 2 3 4	1 2 3 4
Diplomas or Degrees			
Describe Course of Study or Major			
Describe Specialized Training, Military Experience, Skills & Extracurricular Activities			

Record of Previous Employment

Please list the names of your previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If you were self-employed, give the business name and supply business references. Attach extra pages if necessary.

Present or Last Employer	Employed	Salary	Your Title or Position	Reason for Leaving
Address	From (mo./yr.)	Start		
		\$		
City, State, Zip	To (mo./yr.)	Final	Name of Last Supervisor	
Telephone		\$		
Previous Employer	Employed	Salary	Your Title or Position	Reason for Leaving
Address	From (mo./yr.)	Start		
		\$		
City, State, Zip	To (mo./yr.)	Final	Name of Last Supervisor	
Telephone		\$		
Previous Employer	Employed	Salary	Your Title or Position	Reason for Leaving
Address	From (mo./yr.)	Start		
		\$		
City, State, Zip	To (mo./yr.)	Final	Name of Last Supervisor	
Telephone		\$		

References

List professional references who are familiar with the quality of your work, have worked directly with you, and have known you for at least two years.

Name	Occupation	Address	Telephone	Years Known

Additional Information

Have you ever been terminated or asked to resign from any job? Yes No

If yes, explain the circumstances:

Please explain any gaps in your employment history:

May we contact your most current employer? **Yes** **No**

Have you ever pled guilty or "no contest" to, or been convicted of a misdemeanor or felony? **Yes** **No**
If yes, give details and dates of each:

Have you been arrested for any matter for which you are out on bail or on your own recognizance pending trial?

Yes **No**

Remarks and Special Qualifications: (Please include any computer systems and programs with which you are familiar.)

I hereby state that all the information that I provided on this application is true and correct.

Signature of Applicant

Date