

CARPENTER



Full-Service Auto Repair, Tires & Towing

934 Chetco Ave, Brookings, OR 97415 Phone: (541) 469.6511 Fax: (541) 469.7914

service@CarpenterPointS.com CarpenterPointS.com

APPLICATION FOR EMPLOYMENT

LAST NAME	FIRST NAME	MIDDLE NAME	SOCIAL SECURITY #		
MAILING ADDRESS		CITY	STATE	ZIP	PHONE NUMBER
POSITION DESIRED	SALARY DESIRED	AVAILABLE DAYS S M T W T F S ALL	ARE YOU ABLE TO WORK FULL TIME? <input type="checkbox"/> YES <input type="checkbox"/> NO		OVERTIME? <input type="checkbox"/> YES <input type="checkbox"/> NO
HAVE YOU EVER BEEN CONVICTED OF A FELONY? <input type="checkbox"/> YES <input type="checkbox"/> NO -- IF YES, PLEASE EXPLAIN:					
ESSENTIAL JOB FUNCTIONS: FREQUENT LIFTING AND MOVING OF WORK-RELATED ITEMS WEIGHING UP TO 50LBS. FREQUENT BENDING, TWISTING, KNEELING. CONTINUOUS STANDING, WALKING, SQUATTING AND REACHING. ARE YOU ABLE TO PERFORM ALL OF THESE ESSENTIAL JOB FUNCTIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO -- IF NO, PLEASE EXPLAIN:					
WHAT PROMPTED YOU TO SELECT CARPENTER TIRE FACTORY AS A POTENTIAL EMPLOYER?					
HAVE YOU APPLIED FOR WORK WITH US PREVIOUSLY? <input type="checkbox"/> YES <input type="checkbox"/> NO -- IF YES, MONTH & YEAR:					

PERSONAL

ARE YOU 18 YEARS OF AGE OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YOU SERVED IN THE MILITARY, WERE YOU HONORABLY DISCHARGED <input type="checkbox"/> YES <input type="checkbox"/> NO
DO YOU HAVE A VALID DRIVERS LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO	STATE: _____ CAN YOU DRIVE A MANUAL TRANSMISSION VEHICLE <input type="checkbox"/> YES <input type="checkbox"/> NO
DO YOU HAVE DEPENDABLE TRANSPORTATION TO WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO	

EDUCATION/TRAINING

EDUCATION: CHECK ALL THAT APPLY HIGH SCHOOL: <input type="checkbox"/> GED <input type="checkbox"/> DIPLOMA COLLEGE: <input type="checkbox"/> SOME COLLEGE <input type="checkbox"/> GRADUATED DEGREE EARNED: _____
TRADE SCHOOLS / COURSES:
OCCUPATIONAL CERTIFICATES OR LICENSES:
OTHER SPECIAL TRAINING OR SKILLS:
INTERESTS & HOBBIES:

PROFESSIONAL AND CHARACTER REFERENCES

NAME:	YEARS KNOWN:	TELEPHONE: - -
OCCUPATION:	RELATIONSHIP TO YOU:	
NAME:	YEARS KNOWN:	TELEPHONE: - -
OCCUPATION:	RELATIONSHIP TO YOU:	
NAME:	YEARS KNOWN:	TELEPHONE: - -
OCCUPATION:	RELATIONSHIP TO YOU:	
NAME:	YEARS KNOWN:	TELEPHONE: - -
OCCUPATION:	RELATIONSHIP TO YOU:	

EMPLOYMENT HISTORY

COMPANY NAME:	SUPERVISOR:	TELEPHONE: - -
JOB TITLE:	EMPLOYED (MTH / YR):	FROM: ___ / ___ TO: ___ / ___
TYPICAL HOURS PER WEEK:	LAST WAGE RATE:	
DESCRIPTION OF DUTIES:		
REASON FOR LEAVING:		

COMPANY NAME:	SUPERVISOR:	TELEPHONE: - -
JOB TITLE:	EMPLOYED (MTH / YR):	FROM: ___ / ___ TO: ___ / ___
TYPICAL HOURS PER WEEK:	LAST WAGE RATE:	
DESCRIPTION OF DUTIES:		
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JOB TITLE:	EMPLOYED (MTH / YR):	FROM: ___ / ___ TO: ___ / ___
TYPICAL HOURS PER WEEK:	LAST WAGE RATE:	
DESCRIPTION OF DUTIES:		
REASON FOR LEAVING:		

IN CASE OF EMERGENCY NOTIFY: _____

ADDRESS: _____ TELEPHONE: _____

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE, CORRECT, AND COMPLETE. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT, IF EMPLOYED, ANY FALSIFICATION, MISREPRESENTATION OR OMISSION OF FACTS REPORTED IN THIS APPLICATION MAY BE CONSIDERED SUFFICIENT CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT, IF EMPLOYED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND IS AT THE DISCRETION OF THE EMPLOYER TO BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

SIGNED: _____ DATE: _____

PLEASE ALSO READ AND SIGN NEXT PAGE

APPLICANT AUTHORIZATION FOR REFERENCE CHECK

I hereby authorize my past employers to release information to Carpenter Auto Center Inc. in Curry County regarding my employment. This release of information covers my employment record in general, including the following information:

1. Dates of employment;
2. Position(s) held;
3. Quality and quantity of work;
4. Attendance habits (excluding worker's compensation, pregnancy, disability FMLA and other protected absences);
5. Relationships with co-workers, supervisors and managers;
6. Attitude toward work (Cooperative? Positive? etc.);
7. Reason for leaving and eligibility for rehire;
8. Willingness to comply with policies and standards;
9. General strengths and weaknesses;
10. Instances of argumentation or temper, or hostile, threatening, or violent behavior;
11. Other relevant information regarding performance, skills, ability, and suitability for employment sought.

I agree that all former employers who provide such information are indemnified and released from liability arising from such disclosures. I also understand that if I do not sign this authorization, my application will be rejected.

Print Name:

Signature:

Date