



Employment Application

Equal Opportunity Employer

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Phone: () _____ E-mail Address: _____

Date Available: _____ Desired Salary: \$ _____

Position Applied for: _____

Valid / Non Restricted
 Driver License No. & State: _____

Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	_____	
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			

If yes, explain: _____

Are you currently or have you been a Welfare/TANF recipient within the last 18 months? _____

If yes, for how long: _____

Are you a disabled Veteran? _____

Are you currently or have you been a food stamp recipient within the last 6 months? _____

Are you currently or have you been an SSI recipient within the last 60 days? _____

Do you reside in one of the following counties: _____Cheyenne County, _____Kiowa County, _____San Juan County

Education

High School: _____ Address: _____
From: _____ To: _____ Did you graduate? YES NO Degree: _____
College: _____ Address: _____
From: _____ To: _____ Did you graduate? YES NO Degree: _____
Other: _____ Address: _____
From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: () _____
Address: _____
Full Name: _____ Relationship: _____
Company: _____ Phone: () _____
Address: _____
Full Name: _____ Relationship: _____
Company: _____ Phone: () _____
Address: _____

Previous Employment

Company: _____ Phone: () _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

Previous Employment Continued

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Applicant Signature Date

Applicant Information

Please complete, sign and date the attached
**PRE-EMPLOYMENT, CONTINUED EMPLOYMENT DISCLOSURE
AUTHORIZATION, RELEASE FOR BACKGROUND CHECK AND DRUG SCREENING**

I understand that in connection with my application for Employment and/or Continuous Employment, Premier Auto and RV, Inc., their agents or employees, may be performing, requesting, obtaining or conducting a background check on me. This background check may include an inquiry into my Employment History, Education, General Character or Reputation, Work Experience, Volunteer Experience, Driving, and/or Criminal History. If my position involves handling money and/or having access to monies and/or other transferable monetary instruments, my Credit History may also be checked.

I understand that Premier Auto and RV, Inc. may rely on any part of all of this Information in determining whether to extend an offer of Employment to me. I further understand that if any adverse action is taken Premier Auto and RV, Inc., or if Premier Auto and RV, Inc. should choose not to extend an offer of Employment to me based upon the Information, that I will be provided a copy of such Information along with a summary of my rights under the Fair Credit Reporting Act.

I understand that the background check, which may be performed by Investigators, is being performed as part of the process to evaluate me prior to Employment and is not conducted for any purpose other than in connection with my Application for Employment and/or my eligibility for Continued Employment.

I have read this Pre-Employment and Continued Employment and by signing below, hereby authorize Investigators to conduct a background check as described herein in conjunction with my application for employment. I hereby release any and all Investigators, including Premier Auto and RV, Inc. and its representatives from any and all liability related to the procurement or disclosure of any information provided by me or obtained about me in connection with my Application with Premier Auto and RV, Inc. I further direct and authorize Investigators to conduct the background check and further authorize any third parties who may be the custodians of or in possession of the requested Information, to disclose such Information to Investigators in connection with this background check.

Although furnishing your Social Security Number is not optional, it shall be used for NO other purpose than to make the process for conducting a background search more accurate. It shall not be sold, or in any way transferred to a third party except for the express purpose of conducting the background check.

All applicants for employment, including part-time and seasonal positions and applicants who are former employees, are subject to drug and alcohol testing. An applicant must pass the drug test to be considered for employment. An applicant will be provided written notice of this policy and by signature will be required to acknowledge receipt and understanding of the policy. If an applicant refuses to take a drug or alcohol test, or if evidence of the use of illegal drugs or alcohol by an applicant is discovered, either through testing, or through other means, the pre-employment process will be terminated.

Printed Name _____ Social Security Number _____

Date of Birth _____ Former Last Name(s) *if applicable* _____

Current Street Address: _____ City _____ State _____ Zip Code _____

Former Street Address: _____ City _____ State _____ Zip Code _____

Applicant Signature _____ Date _____