

Application for Employment

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on any basis prohibited by local, state or federal law. Equal access to employment, services and programs is available to all persons.

Personal Information				
Name	Social Security Number			
Address				
Home Phone	Mobile Phone			
Date Available for Work?				
Can you work overtime a	s necessary?			
Can you travel if required	l for this position?			
Can you submit proof of	legal employment authorization and identity?			
Salary desired?				
Have you ever been conv	icted of any misdemeanors or felonies?			
If yes, year	Explain conviction (use another sheet of paper if needed)			
(A conviction does not au	atomatically bar from employment)			
Driver's License number				
Position Applying for				
E-Mail address				

Former Employers

Please provide all employment information for the last 4 employers starting with the most recent.

Employer	Job Title
Name	
Address	
Supervisor	Supervisor
Name	Phone
Hire Date	Leave Date
Starting Pay	Ending Pay
Reason for	May we
leaving	contact?
Employer	Job Title
Name	
Address	
Supervisor	Supervisor

Automatic LEASING SERVICE

Name	Phone
Hire Date	Leave Date
Starting Pay	Ending Pay
Reason for	May we
leaving	contact?
Employer	Job Title
Name	
Address	
Supervisor	Supervisor
Name	Phone
Hire Date	Leave Date
Starting Pay	Ending Pay
Reason for	May we
leaving	contact?
Employer	Job Title
Name	
Address	
Supervisor	Supervisor
Name	Phone
Hire Date	Leave Date
Starting Pay	Ending Pay
Reason for	May we
leaving	contact?

Education

	Name of school	Location	Last Year Comp	leted	Graduated?	Course of	f Study
High School							
College							
Technical Trainin	ng						
Other Skills							
Other Skills							

References

(Please do not list any family members)

Name	Relationship	Phone Number	Years acquainted	Other

I hereby authorize Automatic Leasing Service Inc. to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.



If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly either I or the employer can terminate the relationship at will, without cause, at any time, so long as there is no violation of applicable federal and state laws.

I further agree that I will abide by all rules, regulations, and policies or the potential employer and that failure to do so may be cause for termination.

I understand that it is the policy of the potential employer not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within 3 days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant Signature _____

Date:_____