

TAYLOR MOTOR COMPANY

Employment Application

APPLICANT INFORMATION										
Last Name			First				M.I.			
Street Address						Apartment/Unit #				
City			State			ZIP				
Phone			E-mail Address							
Are you at least 18 years old?		Yes <input type="checkbox"/>		No <input type="checkbox"/>		If No, Date of Birth		___ ___/___ ___/___ ___		
Date Available			Social Security No.				Desired Salary			
Type of Employment		Full Time <input type="checkbox"/>		Part Time <input type="checkbox"/>		Seasonal <input type="checkbox"/>		Summer <input type="checkbox"/>		
Position Applied for										
Location Applied for		Benton <input type="checkbox"/>		Carbondale <input type="checkbox"/>		Marion <input type="checkbox"/>		Mt. Vernon <input type="checkbox"/>		Any <input type="checkbox"/>
Availability	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday			
Start										
End										
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?				
EDUCATION										
High School				Address						
From		To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
College				Address						
From		To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Other				Address						
From		To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
REFERENCES										
<i>Please list three professional references. (non-related)</i>										
Full Name		Relationship		Phone		()				
Full Name		Relationship		Phone		()				
Full Name		Relationship		Phone		()				
MILITARY SERVICE										
Branch						From				To
Rank at Discharge						Type of Discharge				

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 <input type="checkbox"/>	NO <input type="checkbox"/>
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 <input type="checkbox"/>	NO <input type="checkbox"/>
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 <input type="checkbox"/>	NO <input type="checkbox"/>

ATTRIBUTES
<i>List your five best attributes (Bonus points for creativity)</i>
1.
2.
3.
4.
5.

DISCLAIMER AND SIGNATURE
<p>I certify that the information contained in this application is correct and accurate to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or immediate termination of employment at any point in the future if I am hired.</p> <p>I hereby authorize the verification of any and all information provided on this form.</p>
<p>Signature: _____ Date: _____</p>