## **Bills Auto Sales**

## **Employment Application**

| Applicant Information   |                        |                |          |   |    |           |                |             |  |
|---|------------------------|----------------|----------|---|----|-----------|----------------|-------------|--|
| Full Name:  | Full Name:             |                |          |   |    |           | Date:          |             |  |
|   | Last                   | Firs           | st       |   |    | M.I.      |                |             |  |
| Address:  | Street Address         |                |          |   |    |           | Apartment/Unit | <del></del> |  |
|   | Street Address         |                |          |   |    |           | Apartment/Onit | +           |  |
|   | City                   |                |          |   |    | State     | ZIP Code       |             |  |
| Phone:  |                        |                |          | Email   |    |           |                |             |  |
| Date Availal  | ble:                   | Social Securit |          |   |    |           |                |             |  |
| Position App  | olied for:             |                |          |   |    |           |                |             |  |
| Are you a citizen of the United States?  YES NO               |                        |                |          | YES NO If no, are you authorized to work in the U.S.? |    |           |                |             |  |
| Have you ever worked for this company?  YES NO  If yes, when? |                        |                |          |   |    |           |                |             |  |
| YES NO Have you ever been convicted of a felony?              |                        |                |          |   |    |           |                |             |  |
| If yes, expla   | in:                    |                |          |   |    |           |                |             |  |
| Education   |                        |                |          |   |    |           |                |             |  |
| High School: Address:   |                        |                |          |   |    |           |                |             |  |
| From:   | To:                    | Did you g      | raduate? | YES 🗆   | NO | Diploma:: |                |             |  |
| College:  |                        |                | Address  |   |    |           |                |             |  |
| From:   | To:                    | Did you g      | raduate? | YES   | NO | Degree:   |                |             |  |
| Other:  |                        |                | Address  |   |    |           |                |             |  |
| From:   | To:                    | Did you g      | raduate? | YES   | NO | Degree:   |                |             |  |
|   |                        |                | Refer    | ences   |    |           |                |             |  |
| Please list   | three professional ref | erences.       |          |   |    |           |                |             |  |
| Full Name:  | full Name:             |                |          |   |    |           |                |             |  |
| Company:  |                        |                |          |   |    | Pho       | ne:            |             |  |
| Address:  |                        |                |          |   |    |           |                |             |  |

| Full Name:          |  |                   |             | Relationship:            |
|---------------------|--|-------------------|-------------|--------------------------|
| Company:            |  |                   |             | Phone:                   |
| Address:            |  |                   |             |                          |
| Full Name:          |  |                   |             | Relationship:            |
| Company:            |  |                   |             | Phone:                   |
| Address:            |  |                   |             |                          |
|                     | Previous E                             | mployme           | ent         |                          |
| Company:            |  |                   |             | Phone:                   |
| Address:            |  |                   |             | Supervisor:              |
| Job Title:          | Starting S                             | Salary: <u>\$</u> |             |                          |
| Responsibilities:   |  |                   |             |                          |
|                     | To:                                    |                   |             |                          |
| May we contact you  | r previous supervisor for a reference? | YES               | NO          |                          |
| _                   |  |                   |             |                          |
| A -l -l             |  |                   |             | Phone:Supervisor:        |
|                     | Chautina C                             |                   |             |                          |
|                     |  | Salary: <u>\$</u> |             | Ending Salary: <u>\$</u> |
| Responsibilities:   |  |                   |             |                          |
| From:               | To:                                    | Reason fo         | or Leaving: |                          |
| May we contact you  | r previous supervisor for a reference? | YES               | NO          |                          |
| Company:            |  |                   |             | Phone:                   |
| ۰ <u></u>           |  |                   |             | Supervisor:              |
|                     | Starting Salary:\$                     |                   |             | Ending Salary:\$         |
|                     |  |                   |             |                          |
| From:               | To:                                    |                   |             |                          |
|                     |  | YES               | NO          |                          |
| May we contact your | r previous supervisor for a reference? |                   |             |                          |

| 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. |                    |     |  |  |  |  |
| Signature:  | Da                 | to: |  |  |  |  |