

EMPLOYMENT APPLICATION

Date Application Completed: _____

Please print legibly in ink.

Position Desired: _____ Full Time Part Time

How did you hear about Hall? Newspaper Agency Job Fair Website _____

Referred by _____ Other _____

Have you ever worked for Hall? No Yes If yes, when and where? _____

FULL NAME:

Last: _____ First: _____ Middle: _____

Have you ever been known by any other name? Yes No If yes, please provide all names you have used or been known by to enable accurate verification of your employment and education history.

SSN# _____

ADDRESS:

Street: _____

City: _____ State: _____ ZIP: _____

Home Phone# _____ Business Phone# _____

If a driver's license is required for the position for which you are applying, do you have a valid driver's license?

Yes No License# _____ Exp Date: _____ State _____

Are you eligible to work in the United States? Yes No

Are you over 18 years of age? Yes No Can you furnish proof of age? Yes No

Can you accept a position immediately? Yes No

If not, when are you available to begin work? _____

May we call you at your business phone? Yes No

CONVICTIONS:

In answering the following questions, do not include arrests, misdemeanor convictions, any convictions for which the

record has been sealed or expunged. A conviction record will not necessarily be a bar to employment. Factors such as age of offense, seriousness and nature of the violation, rehabilitation, and relatedness to the position sought will be taken into account.

Have you ever pled guilty or "no contest" to, or been convicted of a felony? Yes No

If yes, give details and dates of each conviction: _____

EDUCATION:

Please list Undergraduate/College Record:

Degree/Certification: _____
Course of Study: _____
School: _____
City & State: _____
Years Attended: _____

Degree/Certification: _____
Course of Study: _____
School: _____
City & State: _____
Years Attended: _____

List any special skills/training relevant to the position for which you are applying:

REFERENCES:

List 3 people whom you have known for at least 2 years. Do not list previous employers or relatives.

Name	Occupation	Address	Telephone	Yrs. Known

MILITARY SERVICE:

Branch: _____ Rank: _____

From: _____ To: _____ Type of Discharge: _____

EMPLOYMENT HISTORY/WORK EXPERIENCE:

Please list the names of your previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references. You must complete this section even if you include a resume.

(Attach extra sheets if necessary.)

Current or Last Employer: Address: Phone:	Dates Employed: From: To:	Pay Rate: Start: Final:	Title/Position: Supervisor: May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason Left:
Previous Employer: Address: Phone:	Dates Employed: From: To:	Pay Rate: Start: Final:	Title/Position: Supervisor: May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason Left:
Previous Employer: Address: Phone:	Dates Employed: From: To:	Pay Rate: Start: Final:	Title/Position: Supervisor: May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason Left:
Previous Employer: Address: Phone:	Dates Employed: From: To:	Pay Rate: Start: Final:	Title/Position: Supervisor: May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason Left:

Please explain any gaps in your employment history: _____

May we contact your present employer? Yes No If no, please explain: _____

EMPLOYMENT HISTORY/WORK EXPERIENCE (cont'd):

Please indicate any actual work experience you have in any of the following positions:

Office	Sales/Leasing	Service & Repair	Parts	Body Shop
<input type="checkbox"/> Office Manager	<input type="checkbox"/> Sales Manager	<input type="checkbox"/> Service Manager	<input type="checkbox"/> Manager	<input type="checkbox"/> Painter
<input type="checkbox"/> Receptionist	<input type="checkbox"/> Sales	<input type="checkbox"/> Service Writer	<input type="checkbox"/> Counter	<input type="checkbox"/> Body Repair
<input type="checkbox"/> Accts Receivable	<i>List franchise(s):</i>	<input type="checkbox"/> Dispatcher	<input type="checkbox"/> Stock	
<input type="checkbox"/> Accts Payable	_____	<input type="checkbox"/> Shop Foreman	<input type="checkbox"/> Driver	
<input type="checkbox"/> Payroll Clerk	<input type="checkbox"/> F&I Manager	<input type="checkbox"/> Mech/Tech		
<input type="checkbox"/> Tag/Title Clerk	<input type="checkbox"/> Leasing Manager	<input type="checkbox"/> Electrician		
<input type="checkbox"/> Warranty Clerk	<input type="checkbox"/> Fleet Manager	<input type="checkbox"/> Helper		
<input type="checkbox"/> Data Entry Cashier				

CONSUMER CREDIT REPORT AUTHORIZATION

I hereby authorize Hall Automotive and its affiliated companies to obtain consumer credit reports on me, which may be used for employment purposes prior to and during my employment.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT

Signature of Applicant: _____

Printed Name: _____

Date: _____

APPLICANT'S STATEMENT

I understand that this application will be given every consideration, but it is not a promise of employment. I also understand that any offer of employment may be conditioned upon passing a physical examination and a test for the presence of drugs or alcohol in my system, as well as a satisfactory background investigation.

I understand that if I am hired, my employment will be for no definite period I further understand that I have the right to terminate my employment at any time, with or without notice, and the Company has the same right. No one other than the President of the Company has the authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the Company reserves the right to require me to submit to a test for the presence of drugs in my system prior to and during employment to the extent permitted by law. Further, I understand that at any time after I am hired, the Company may require me to submit to a physical examination and a drug / alcohol test, to the extent permitted by law. I consent to the disclosure of the results of the physical examinations and related tests to the Company. I also understand that I may be required to take other tests, such as personality and honesty tests prior to and during my employment

I understand that prior to and during employment the Company may investigate my driving record and my criminal record, and that an investigative consumer report may be prepared whereby information is obtained through credit bureaus, current or prior employers, and personal interviews with my neighbors, friends and others with whom I am acquainted This inquiry may include information as to my qualifications, character, general reputation, personal characteristics and mode of living I hereby authorize all prior employers, schools, credit bureaus, the Social Security Administration, law enforcement agencies and investigative agencies to give Hall Automotive any and all information concerning my current or previous employment and any pertinent information they may have, personal or otherwise, concerning my qualifications for the position applied for.

I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I hereby fully waive any rights or claims I have or may have against Hall Automotive or my former employers, their agents, employees and representatives, as well as other individuals who release information to the Company or rely upon information furnished, and release them from any and all liability, claims or damages that may directly or indirectly result from the use, disclosure, or release of any such information, whether such information is favorable or unfavorable to me.

I hereby certify that all of the information that I provide on this application and in any interview is true and accurate to the best of my knowledge. I understand that if I am employed and any such information is later found to be false in any respect, my employment may be terminated.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT

Acknowledged and Agreed: _____

Signature of Applicant: _____

Printed Name: _____

Date: _____

HALL AUTOMOTIVE IS AN EQUAL OPPORTUNITY EMPLOYER