



PH 303.691.9484

2005 South Holly Street  
Denver, Colorado 80222  
FX 303.691.8056 addisonauto.com

## Employment Application

### Personal Data

Name:		Date:	
Position Applying For:			
Social Security Number:			
Address:			
City:	State:	Zip	
Home Phone:		Message Phone:	
Do you have a valid driver's license? <b>Yes</b> <b>No</b>		License No.	Exp. Date:
Do you have adequate transportation to and from work? <b>Yes</b> <b>No</b>			
Have you been cited for a traffic violation of any kind within the last FIVE years? <b>Yes</b> <b>No</b> <b>If yes, please give date and details:</b>			
Who were you referred by?			

### Education

Education	Elementary	High School	College/University	Graduate/Professional
School Name				
Years Completed: (Circle)	4   5   6   7   8	9   10   11   12	1   2   3   4	1   2   3   4
Diplomas or Degrees				
Describe Course of Study or Major				
Describe Specialized Training, Military Experience, Skills & Extracurricular Activities				

## Record of Previous Employment

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 you were self-employed, give the business name and supply business references. Attach extra pages if necessary.

Present or Last Employer	Employed	Salary	Your Title or Position	Reason for Leaving
	From (mo./yr.)	Start		
Address		\$		
City, State, Zip	To (mo./yr.)	Final	Name of Last Supervisor	
Telephone		\$		
Previous Employer	Employed	Salary	Your Title or Position	Reason for Leaving
	From (mo./yr.)	Start		
Address		\$		
City, State, Zip	To (mo./yr.)	Final	Name of Last Supervisor	
Telephone		\$		
Previous Employer	Employed	Salary	Your Title or Position	Reason for Leaving
	From (mo./yr.)	Start		
Address		\$		
City, State, Zip	To (mo./yr.)	Final	Name of Last Supervisor	
Telephone		\$		
Previous Employer	Employed	Salary	Your Title or Position	Reason for Leaving
	From (mo./yr.)	Start		
Address		\$		
City, State, Zip	To (mo./yr.)	Final	Name of Last Supervisor	
Telephone		\$		
Previous Employer	Employed	Salary	Your Title or Position	Reason for Leaving
	From (mo./yr.)	Start		
Address		\$		
City, State, Zip	To (mo./yr.)	Final	Name of Last Supervisor	
Telephone		\$		
Previous Employer	Employed	Salary	Your Title or Position	Reason for Leaving
	From (mo./yr.)	Start		
Address		\$		
City, State, Zip	To (mo./yr.)	Final	Name of Last Supervisor	
Telephone		\$		
Previous Employer	Employed	Pay	Your Title or Position	Reason for Leaving
	From (mo./yr.)	Start		
Address		\$		
City, State, Zip	To (mo./yr.)	Final	Name of Last Supervisor	
Telephone		\$		

## References

List professional references who are familiar with the quality of your work, have worked directly with you, and have known you for at least two years.

Name	Occupation	Address	Telephone	Years Known

## Additional Information

Have you ever been terminated or asked to resign from any job?

Yes ☐ No ☐

If yes, explain the circumstances:

---

---

---

Please explain any gaps in your employment history:

---

---

---

May we contact your most current employer? Yes ☐ No ☐

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

If yes, give details and dates of each:

---

---

---

---

Have you been arrested for any matter for which you are out on bail or on your own recognizance pending trial?

Yes ☐ No ☐

# Experience

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

<p><b>Administration</b></p> <p><input type="checkbox"/> Office Manager</p> <p><input type="checkbox"/> Bookkeeper</p> <p><input type="checkbox"/> Accounts Receivable</p> <p><input type="checkbox"/> Accounts Payable</p> <p><input type="checkbox"/> Payroll Clerk</p> <p><input type="checkbox"/> Warranty Clerk</p> <p><input type="checkbox"/> Data Entry</p> <p><input type="checkbox"/> Cashier</p> <p><input type="checkbox"/> Job Costing</p> <p><input type="checkbox"/> Receptionist</p> <p><input type="checkbox"/> Insurance Claims</p> <p><input type="checkbox"/> Word Processing</p> <p><input type="checkbox"/> Computer Accounting</p> <p><input type="checkbox"/> Financial Statements</p> <p><input type="checkbox"/> Financial Analysis</p> <p><input type="checkbox"/> Real Estate</p> <p><input type="checkbox"/> Tax Returns</p> <p><b>Sales</b></p> <p><input type="checkbox"/> Salesperson Retail</p> <p><input type="checkbox"/> Salesperson Service</p> <p><input type="checkbox"/> Salesperson Wholesale</p> <p><input type="checkbox"/> Department Sales Mgr.</p> <p><input type="checkbox"/> Regional Sales Mgr.</p> <p><input type="checkbox"/> Leasing Manager</p> <p><input type="checkbox"/> Salesperson (New Car)</p> <p><input type="checkbox"/> Salesperson (Used Car)</p> <p><input type="checkbox"/> Phone Sales</p> <p><input type="checkbox"/> Customer Service Rep.</p> <p><input type="checkbox"/> Estimator</p> <p><input type="checkbox"/> Service Advisor</p>	<p><b>Body Production</b></p> <p><input type="checkbox"/> Frame Technician</p> <p><input type="checkbox"/> Universal Bench Systems</p> <p><input type="checkbox"/> Dedicated Jig Systems</p> <p><input type="checkbox"/> Body Technician</p> <p><input type="checkbox"/> Mig Welding</p> <p><input type="checkbox"/> Oxy/Acetylene Welding</p> <p><input type="checkbox"/> Mechanic</p> <p><input type="checkbox"/> Suspension &amp; Steering</p> <p><input type="checkbox"/> Wheel Alignment</p> <p><input type="checkbox"/> Plastic Repair</p> <p><input type="checkbox"/> Cooling Systems</p> <p><input type="checkbox"/> Air Conditioning</p> <p><input type="checkbox"/> ABS Brakes</p> <p><input type="checkbox"/> Air Bag Systems</p> <p><input type="checkbox"/> Exhaust Systems</p> <p><input type="checkbox"/> Automotive Electrical</p> <p><input type="checkbox"/> Apprentice/Helper</p> <p><input type="checkbox"/> Color Matching</p> <p><input type="checkbox"/> Computerized Paint Mixing</p> <p><input type="checkbox"/> Paint Preparation</p> <p><input type="checkbox"/> Refinish Technician</p> <p><input type="checkbox"/> Machine Polishing</p> <p><input type="checkbox"/> Detailer</p> <p><input type="checkbox"/> Maintenance</p> <p><input type="checkbox"/> Glass Installation</p>	<p><b>Mechanical Production</b></p> <p><input type="checkbox"/> Line Technician</p> <p><input type="checkbox"/> Apprentice</p> <p><input type="checkbox"/> Alignment / Suspension</p> <p><input type="checkbox"/> Tires</p> <p><input type="checkbox"/> Factory Rec. Maintenance</p> <p><input type="checkbox"/> HD Engine, Drivetrain R&amp;R</p> <p><input type="checkbox"/> Drivability</p> <p><input type="checkbox"/> Emissions</p> <p><input type="checkbox"/> Engine Rebuild</p> <p><input type="checkbox"/> Trans Rebuild</p> <p>What Scan Tools are you familiar with?</p> <p>a) _____</p> <p>b) _____</p> <p>c) _____</p> <p>d) _____</p> <p><input type="checkbox"/> Brakes</p> <p><input type="checkbox"/> ABS</p> <p><input type="checkbox"/> Air Bags</p> <p><input type="checkbox"/> Climate Control</p> <p>Do you specialize in any specific makes?</p> <p>a) _____</p> <p>b) _____</p> <p>c) _____</p> <p>d) _____</p> <p>Are you familiar with:</p> <p><input type="checkbox"/> Identifix</p> <p><input type="checkbox"/> Alldata</p> <p><input type="checkbox"/> Mitchell</p> <p><input type="checkbox"/> IATN</p>	<p><b>Other</b></p> <p><input type="checkbox"/> Shop Manager</p> <p><input type="checkbox"/> Service Manager</p> <p><input type="checkbox"/> Insurance Adjuster</p> <p><input type="checkbox"/> Insurance Appraiser</p> <p><input type="checkbox"/> Shop Foreman</p> <p><input type="checkbox"/> Production Manager</p> <p><input type="checkbox"/> Department Manager</p> <p><input type="checkbox"/> Parts Manager</p> <p><input type="checkbox"/> Parts Counter Person</p> <p><input type="checkbox"/> Inventory Control</p> <p><input type="checkbox"/> Purchasing Agent</p> <p><input type="checkbox"/> Advertising/Marketing</p>
---	---	---	--

Remarks & Special Qualifications: (Please include any computer systems and programs with which you are familiar.)

---



---

I hereby state that all the information that I provided on this application is true and correct.

---

Signature of Applicant

Date

## DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Addison Auto Repair & Body Shop, or any of its subsidiaries may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" conducted by a consumer reporting agency which may include information about your character, general reputation, personal characteristics, and/or mode of living and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history (State and Federal records), social security verification, address trace, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any report conducted by a consumer reporting agency. Please be advised NationSearch.com, LLC (NationSearch)—11184 Huron St. Suite 13; Northglenn, CO 80234; (800)-827-9550—will be the consumer reporting agency conducting the background investigation. The scope of this notice and authorization is all encompassing, however, allowing the Company to obtain from any outside organization all manners of consumer reporting now and throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any report conducted by a consumer reporting agency.

### **ACKNOWLEDGEMENT AND AUTHORIZATION**

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, credit reporting agency, employer, to provide any and all background information requested by NationSearch.com, LLC—11184 Huron St. Suite 13; Northglenn, CO 80234 (800)-827-9550—another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

**Notice to California Applicants:** Under section 1786.22 of California Civil Code, you have the right to request from NationSearch, upon proper identification, the nature and substance of all information in files pertaining to you, including the sources of information, and recipients of any reports on you, which NationSearch has previously furnished within the two-year period preceding your request. You may view the file maintained on you by contacting NationSearch during normal business hours. You may also obtain a copy of this report(s) upon submitting proper identification. Upon making a written request, you may receive a summary of your report.

**New York applicants or employees only:** You have the right to inspect and receive a copy of any report conducted by a consumer reporting agency and requested by the Company by contacting the consumer reporting agency identified above directly.

**Notice to Maine Applicants:** Under Chapter 210 Section 1314 of Maine revised Statutes, you have the right, upon request, to be informed within 5 business days of s[ ] a request to whether or not a consumer report was requested. If such report was obtained, you may contact the consumer reporting agency, NationSearch, and request a copy of the report(s) compiled.

**Minnesota and Oklahoma applicants or employees only:** Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

Last Name:	First Name:	Middle Name:
Other Names Used:	SSN:	Date of Birth: (For Employment Purposes Only)
Motor Vehicle Number & State of Issue: (Driver's License Number)	Current Address:	

Signature:

Date:

Please initial this box in affirmation that you have been advised of your rights as it pertains to this consumer report, and are aware of the consumer reporting agency conducting the background investigation:

--



PH 303.691.9484

2005 South Holly Street  
Denver, Colorado 80222  
FX 303.691.8056 addisonauto.com

**AUTO REPAIR & BODY SHOP**

*"Your one-stop auto shop since 1982!"*

Disclosure and authorization for a driver's license records check (MVR)

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_

County \_\_\_\_\_ Zip \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State of Issue \_\_\_\_\_

Date of Birth \_\_\_\_\_ M/D/Y

This authorization is being given in regards to a MVR (Motor Vehicle Request for a driver's license inquiry) check and this information will be used to determine your qualifications to operate a motor vehicle while conducting official business for **Addison Auto Repair & Body Shop**.

All employees are required (yearly) to submit this inquiry before operating any vehicle while on official duty for **Addison Auto Repair & Body Shop**. This includes any company owned, leased, rented or any personal vehicle used or operated.

PLEASE READ AND SIGN THE FOLLOWING:

I authorize **Addison Auto Repair & Body Shop** to conduct or hire services to conduct a MVR regarding my driver's license/history.

I authorize any parties contacted to release information to my employer, its insurance agent, or its insurance company regarding my current and/or previous driving record.

I release all persons and entities from liability for damages that may arise from the release of this information.

I waive all provisions of law prohibiting the disclosure of information.

I understand that **Addison Auto Repair & Body Shop** and its insurance agents, or its insurance company cannot guarantee the accuracy of any information reported to it by third parties.

I release **Addison Auto Repair & Body Shop** and its insurance agents, or its insurance company from liability for damages that arise from errors or omissions in this authorized inquiry of my driving history and/or driver's license.

Any applicant who refuses to complete this form, omits material facts, or provides false information, will not be considered to operate a vehicle while employed by: **Addison Auto Repair & Body Shop**.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_