# **EMPLOYMENT APPLICATION**

PLEASE PLACE A CHECK BY YOUR RESPONSE OR PROVIDE THE APPROPRIATE INFORMATION  Are you interested in:  What schedules would you prefer?  Weekdays  Weekends  Evenings  Nights  How did you hear about us?  Walk In  Referral  Name:  Where:  Name:  Where:  Dates:  Do you know anyone who works here?  No  Yes  Name:  Desired Pay:  Hourly Pay  (Minimum, if applicable)  When are you able to start work?  Position desired:  EASE CHECK YES OR NO TO THE FOLLOWING:	PLEASE PRINT OR TYPE		Today's Date:				
PLEASE PLACE A CHECK BY YOUR RESPONSE OR PROVIDE THE APPROPRIATE INFORMATION  Are you interested in:  What schedules would you prefer?  Weekdays  Weekends  Evenings  Nights  How did you hear about us?  Walk In  Referral  Name:  Where:  Name:  Where:  Dates:  Do you know anyone who works here?  No  Yes  Name:  Desired Pay:  Hourly Pay  (Minimum, if applicable)  When are you able to start work?  Position desired:  EASE CHECK YES OR NO TO THE FOLLOWING:	First	Name	MI	MI Last Name		d Name/Nickname	
PLEASE PLACE A CHECK BY YOUR RESPONSE OR PROVIDE THE APPROPRIATE INFORMATION  Are you interested in:    Full Time	Street	Address	City	· · · · · · · · · · · · · · · · · · ·	State	Zip Code	
Are you interested in:  What schedules would you prefer?  Weekdays  Weekends  Evenings  Nights  Walk In  Referral Name:  Name:  Have you worked for this company before?  Do you know anyone who works here?  No  Yes  Name:  Desired Pay:  Hourly Pay (Minimum, if applicable)  When are you able to start work?  Position desired:  EASE CHECK YES OR NO TO THE FOLLOWING:	Pl	hone	Alternate/ Phone		Email Addre	ss	
Have you worked for this company before?  No Yes Dates:  Do you know anyone who works here? No Yes Name:  Desired Pay: Hourly Pay	Are you interes	ted in:		Full Time	Part Time	Temporary	
Do you know anyone who works here? No Yes Name:  Desired Pay: Hourly Pay	•		Walk In		ment	Other:	
Desired Pay: Hourly Pay SAnnual Pay SANnual Pay SANnual Pay SANNIM Desired  When are you able to start work? Date:  In what local area do you prefer to work?  Position desired:  EASE CHECK YES OR NO TO THE FOLLOWING:		ed for this company	No	Yes	Dates:		
(Minimum, if applicable)  When are you able to start work?  In what local area do you prefer to work?  Position desired:  EASE CHECK YES OR NO TO THE FOLLOWING:	Do you know a	nyone who works here?	No	Yes	Name:		
In what local area do you prefer to work?  Position desired:  EASE CHECK YES OR NO TO THE FOLLOWING:	Desired Pay:		\$	Annual Pay	\$ Minimum	\$ Desired	
Position desired:  EASE CHECK YES OR NO TO THE FOLLOWING:	When are you a	ble to start work?	Date:		-		
EASE CHECK YES OR NO TO THE FOLLOWING:	In what local are	ea do you prefer to work?	•				
	Position desire	d:					
	EASE CHECK Y	ES OR NO TO THE FOLL	OWING:				
e you authorized to work in the United States?	re you authorized to work in the United States?				Yes No		

Bay Area Driving School is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, Bay Area Driving School complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. Bay Area Driving School also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

Company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and

employment author	ization.						
Are you under 18 years of age?					Yes	No	
If yes, can you furr	nish a work permit?	•			Yes	No	
	Are you capable of performing the essential functions of the job for Yes No which you are applying with or without a reasonable accommodation?						
PLEASE LIST YO  Massachusetts appli			-		-		
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## **EDUCATION:**

NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	DID YOU GRADUATE?	TYPE OF DEGREE OR DIPLOMA
HIGH SCHOOL OR PREP			
COLLEGE			
COLLEGE OR GRADUATE			
OTHER			

## **PROFESSIONAL DESIGNATIONS:**

DESIGNATION	ORGANIZATION GRANTING DESIGNATION	DATE COMPLETED
DESIGNATION	ORGANIZATION GRANTING DESIGNATION	DATE COMPLETED

## **PROFESSIONAL LICENSES:**

TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER
TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER

## **REFERENCES: Please list three professional references**

NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE

#### PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

<u>References</u>: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

<u>Temporary/Contract Employment</u>: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

SIGNED:	DATE:

# For California Applicants Only (Optional)

I am providing my contact information to the Consider such information to be private. I under file class action lawsuits against companies and	stand that from time to time individuals that the mere filing of a lawsuit does not
mean that the claims in the lawsuit have merit.	•
individuals or their attorneys may ask that the O	. , .
information as part of a class action lawsuit. I do my contact information to any individual or attorn unless I later give my express written consent, or	ey in any such lawsuit that may be filed, or unless the Company is required to do
so by law or the Company determines that I am a	a witness to that lawsuit.
Signature of Applicant	Date