

APPLICATION FOR EMPLOYMENT

APPLICATION INSTRUCTIONS

1. Type or print clearly. The Application must be completed in its entirety even if a resume is attached. Incomplete or illegible applications will not be processed.
2. Please answer all questions completely and accurately. False or misleading statements during the interview or on this form are grounds for terminating the application process, or, if discovered after employment, terminating employment at any time.
3. This application shall be considered active for a period not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should complete another application.
4. All job candidates who receive an offer of employment will be required, before reporting to work, to undergo a post offer employment physical and drug test. Positive test results and/or failure to pass the physical will cause withdrawal of the job offer. Also, an MVR will be required as proof of a good driving record for most positions.
5. This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Last Name	First Name	Middle	Maiden	Date
Current Address	Number	Street	City	State
				Zip Code
Social Security Number	Have you used any other names or Social Security Numbers other than those stated? If so, please list. <input type="checkbox"/> Yes <input type="checkbox"/> No			
Home Phone	Work Number	List all states and countries of residence for the past seven years.		

For which position are you applying? _____

Date available to start? _____ Fulltime Parttime

Are you available to work _____ days _____ nights _____ weekends _____ holidays _____ flexible schedules?

List any days and hours you are not available _____ .

Would you be able to relocate if the job warranted? _____ .

Can you travel if the position calls for travel? _____ .

Are you currently on layoff status? Yes No

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Are you 21 years of age or older? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? Yes No
 Proof of citizenship or immigration status will be required upon employment.

If the job requires, do you have the appropriate valid drivers license? Yes No
 License Number _____ Type _____ State of License _____
 If available, attach copy of driving record report dated within the last 7 days.

Have you had any traffic violations in the last 36 months? If yes, please describe _____ Yes No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Have you had any prior licenses out of state?

If so, where? when? _____

Yes No

Do you speak, read, or write any foreign language? If so, please describe. _____

Yes No

Please list any other skills, licenses or certificates that may be job-related or you feel would be of value. _____

Please list any special training received or classes you have attended. _____

Please list any computers, software, or equipment that you operate. _____

SECURITY

Have you ever been convicted of a crime, including DWI, plead guilty or "no contest" to a criminal charge, or entered into an agreement setting forth conditions for the eventual dismissal of a criminal case?

Yes No

If Yes, please describe Incident, City/State, and Charge.

Have you ever been bonded in prior employment?

Yes No

If Yes, Where? _____

Have you ever had bonding denied?

Yes NO

If Yes, Why? _____

EDUCATION

	SCHOOL NAME CITY/STATE	DATE ATTENDED	GRADUATED Course of Study
HIGH SCHOOL			GRADUATED <input type="checkbox"/> YES <input type="checkbox"/> NO
COLLEGE			GRADUATED <input type="checkbox"/> YES <input type="checkbox"/> NO DEGREE _____
OTHER			

Please circle Highest Grade completed. 7 8 9 10 11 12 13 14 15 16 16+

EMPLOYMENT

Are you currently employed? Yes No

If so, may we contact your employer?

Yes No

Current supervisor's name _____ phone number _____

Have you ever applied or worked for us before?

Yes No

If so, list date, location, and position. _____

Do you have any relatives or friends working for the company?

Yes No

If so, list name and relationship. _____

Have you ever worked for another car rental company or a shuttle company?

Yes No

If yes, who and when: _____

How did you find out about the position available? Newspaper Ad? _____ Referred by? _____

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status. **This must be completed even if you submit/attach a resume.**

1	Employer	Date Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Supervisor's Name	Hourly Rate/Salary	
			Starting	Final
	Job Title			
	Reason for Leaving <input type="checkbox"/> Termination <input type="checkbox"/> Resignation <input type="checkbox"/> Other Explain			
2	Employer	Date Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Supervisor's Name	Hourly Rate/Salary	
			Starting	Final
	Job Title			
	Reason for Leaving <input type="checkbox"/> Termination <input type="checkbox"/> Resignation <input type="checkbox"/> Other Explain			
3	Employer	Date Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Supervisor's Name	Hourly Rate/Salary	
			Starting	Final
	Job Title			
	Reason for Leaving <input type="checkbox"/> Termination <input type="checkbox"/> Resignation <input type="checkbox"/> Other Explain			

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held. You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

State any additional information you feel may be helpful to us in considering your application.

Note to Applicant: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. ASK TO SEE AND READ THE JOB REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING AND/OR BEING CONSIDERED FOR SO YOU CAN ANSWER THIS QUESTION.

Are you capable of performing the activities involved in the job or occupation for which you have applied?

Yes No

REFERENCES (Include only individuals familiar with your work ability. Not relatives)

NAME	ADDRESS/PHONE	YEARS KNOWN	RELATIONSHIP
1. _____			
2. _____			
3. _____			

**APPLICANT CERTIFICATION, AUTHORIZATION, AND RELEASE
PLEASE READ CAREFULLY BEFORE SIGNING**

I hereby certify that I have a genuine interest in being hired and that all of the foregoing statements are true and correct. I agree to assume a continuing responsibility to disclose additional or new information, called for by this Employment Application, but known to me only after this Application was completed, and understand that my failure to make such a disclosure, and that falsification of any of the information given herein, on any employment form or in any interview or at any time, are grounds for immediate termination, regardless of when such failure or falsification may be discovered.

I authorize this prospective employer to verify my statements and to undertake an investigation to gather and keep as much employment and nonemployment information as is permitted by law, and waive any legal requirement to provide notice to me regarding reports or records given or received in accordance with this authorization. Accordingly, all third parties (including individuals, schools, businesses, law enforcement authorities, government agencies and consumer reporting bureaus) are authorized to disclose any and all requested information to this prospective employer, and I agree to release all third parties, as well as this prospective employer and its employees, from any claims arising out of actions taken per these authorizations. Furthermore, I agree to reimburse this prospective employer and/or its employees for their attorney fees, costs and expenses in successfully defending any lawsuit I may assert in state or federal court based on actions connected with this Employment Application and/or the hiring process.

If accepted for employment, I understand that the use of illegal drugs, alcohol and inhalants will be prohibited and I agree to submit to drug testing to detect the use of illegal drugs and alcohol at any time during employment. I also agree to comply with all other company policies, procedures, rules and regulations made known to me at the time of employment or any other times thereafter, and to perform all duties assigned to me to the best of my ability.

I hereby understand and acknowledge that any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the CEO of this organization.

Only the CEO is authorized to enter into an employment agreement with any individual and that agreement is only valid if it is in writing and signed by the CEO.

SIGNATURE OF APPLICANT

DATE