## APPLICATION FOR EMPLOYMENT

Automotive Hospitality of America, Inc.

PO Box 270029 Tampa, FL 33688-0029 Telephone: (866) 423-4822

E-mail: HR@automotivehospitality.com

GENERAL INSTRUCTIONS: Complete every question on all four pages of application. Your application will not be considered if it is incomplete. Read the terms of employment carefully. Print your answer to every question in blue or black ink. If a question does not apply, indicate "N/A." All information provided in this application will be treated confidentially except where permission for the release of the information is provided. Automotive Hospitality of America, Inc. is an Equal Opportunity Employer. We are committed to the recruitment and selection of the most competent persons who have qualifications commensurate with the responsibility of each position. We are committed morally and legally to the support of all laws concerning non-discrimination, equal employment opportunity and individual freedom of choice for all individuals regardless of race, sex, color, religion, national origin, ancestry, physical or mental disability, marital status or age.

## PRE-EMPLOYMENT AND DRUG SCREENING IS REQUIRED

Applications are considered for all positions without regard to race, color, religion, sex, national origin, age, marital, or veteran status, or disability

(PLEASE PRINT) Date of Application			
Position(s) Applied for			
PERSONAL DATA			
Last Name	First	Middle	
Present Address – Number and Street	City	State	Zip Code
Daytime Phone:	Cell Phone/Beeper:		E-mail Address:
Social Security #		Birth Date:	
EMPLOYMENT DATA			
Minimum Salary Requirements:	On What dates are	you available f	for work?
Are you available to work [ ] Full-time [ ]	Part-time [ ] Weekends		
Shift: [ ] Weekdays [ ] Weekends [ ]	Evenings [ ] Nights [ ] (	n Call/Flex	1 Other

MOTOR VEHICLE LIC	CENSE			
Driver's License Number	 ·		_ Number of ti	ckets you had in three years:
State Issued:	Iss	sued Date		_ Expiration Date
Sex:	Height:		Class	
Has your Driver's License	e ever been suspend	led or revoked? [ ]	Yes [ ] No	
If yes, please explain:				
GENERAL DATA				
Have you ever filed an ap	plication here befor	re? [ ] Yes [ ] No	If Yes, give date	:
Have you ever been empl	oyed by Automotive	e Hospitality of Ame	erica, Inc.? [ ]	Yes [ ] No
If Yes: When	Where_		Position	
Name if different than abo	ove:			
Do you have any relatives	s currently employed	d here? [ ] Yes [ ]	No Name of E	Employee
Are you employed now?	[ ] Yes [ ] No			oyer? [ ] Yes [ ] No (A reference from e required before a final job offer is made)
Have you ever been fired	by an employer? [	] Yes [ ] No		
If yes, please explain:				
Are you able to drive a sti	ick shift vehicle? [	] Yes [ ] No		
Are you able to stand and	run for extended pe	eriod of time? [ ] Y	es [] No	
Are you under 19 years of	f age? [ ] Yes	[ ] No		
Is your driver's license re	voked or suspended	? [ ] Yes [ ] ]	No	
Do you depend on someth	ning other than your	own reliable transpo	ortation to get to	work? [ ] Yes [ ] No
You must maintain a prof	Sessional appearance	e. Do you plan to alto	er your appearan	ce while employed? [ ] Yes [ ] No
				or state and driving is required by the job, and Driver's license and DMV report.
Have you ever been arrest	ted and/or convicted	d of a misdemeanor	or felony [ ] Ye	s [ ] No
If yes, please explain:				
				ed, debarred or ineligible from participation in rally funded program [ ] Yes [ ] No
If yes, please explain:				

EDUCATION	High	College/University	Graduate/Professional
School Name			
Years Completed (circle)	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree			

SKILLS & TRAINING, Etc			
Typing/Word Processing – WPM	Business Office Ed	quipment:	
Computers (Check all that apply); WordF	Perfect [ ] Word [ ] Excel [ ]	Lotus [ ] PowerPoint [ ]	Access [ ]
Other applicable skills/experience:			
EMPLOYMENT EXPERIENCE: Please complete the following, even if you assignments and volunteer activities.	u are attaching a resume. Star	rt with your present or la.	st job. Include military service
1			
Employer:			
Address – Number and Street	City	State	Zip Code
Telephone Number:	Job Title:	Supervisor	
Employment Dates:/to _	/Starting Pay I	Rate: \$Last	Pay Rate: \$
Reason For Leaving			
Position Held		May we verify with Emp	oloyer? Yes [ ] No [ ]
2			
Employer:			
Address – Number and Street	City	State	Zip Code
Telephone Number:	Job Title:	Superv	visor
Employment Dates:/to _	/Starting Pay I	Rate: \$ Las	t Pay Rate: \$
Reason for Leaving			
Position Held		May we verify with Emp	bloyer? Yes [ ] No [ ]

3				
Employ	er:			
Address	– Number and Street	City	State	Zip Code
Гelepho	ne Number:	Job Title:	Sup	ervisor
Employ	ment Dates:/ to	/Starting Pay	Rate: \$ I	Last Pay Rate: \$
Reason	for Leaving			
Position	Held		May we verify with E	Employer? Yes [ ] No [ ]
	CANT'S CERTIFICATION AN Read Carefully)	ND AGREEMENT		
1. 2. 3. 4. 5. 6. 7. 8. If e	and I hereby consent to take any authorize any company, school, qualifications and hereby release information.  If employed, I understand that an any time without notice or cause time, without prior notice or cause my employment, I agree to configuidelines of Automotive Hosp. The needs of the employer may schedule, or a work schedule off if employed, I understand that u and drug screen. If I do not mee employment.  I understand that any employme free to resign at any time.  If employed, I understand that may employed it understand that may employed. I understand that may employed.  I understand that Neither Automatical expressed or implied.	recrifies that the facts document and if I misrepresent or delicated I may be terminated. The pyed I may authorization to test, whenever the employer and persons to release any interest and that the employer may also and regulation that the following conditions that the following conditions are the health requirements of reserving the properties of the date of terminate and the pyed and the p	to thoroughly investige deems it necessary in a formation regarding my ersons from all liability tive Hospitality of American the best interest of the ns of the employer as of the empl	gate my work and personal history any employer investigation. I are employment, character, and for any damage for issuing such erica, Inc. may be terminated at employment relationship at any organization. In consideration of outlined in the Policy and shift work, rotating work ditions of employment. Hoyee health, physical capacity, eligible for continued roluntarily entered into and I am if terminated, the employer is I into a contract of employment,
Dat	e	Signature of Applicant		