

## **Technician Employment Application**

## **Instructions**

- #1 ... please print legibly and complete all sections on both sides of the application
- #2 ... this application must be completed in your own handwriting
- #3 ... double-check your completed application for accuracy
- #4 ... sign and date the application on the reverse side once you have completed it

name			
last	first	I	middle initial
Current address			
street	city	state	zip code
Day time phone number	evening	g phone number	
Cell phone	e-mail address		
How long have you resided at the above of	address?		
Did someone refer you to our company? _	If "yes", who?		
	<b>Qualification</b>	<u>IS</u>	
are you certified by any trade associations dates:		"yes" please list all your	certifications with expiration
do you have a state issued smog license?	if so, when doe.	s it expire?/	<i>J</i>
what is the approximate value of your tools	s and equipment? \$		
what Diagnostic equipment are you experi	ienced in using?		
which Repair or Estimating Programs are yo	ou proficient with :		
please rate your Diagnostic Skills on a level	of #1 – #10 #	-	
please rate your Repair Skills on a level of	#1 – #10 #	_	
please list 5 separate words that best descri	ribe you:		
High school graduate Trade school g	raduate College Degree	·	
are you able to provide a resume that refle	ects your educational history?		
please list any technical courses you have	taken within the past 2 years:		
activities & interests (hobbies, etc)			
have you ever been convicted of a felony	? are you willing to a	uthorize a criminal back	ground investigation?
are you willing to participate in any drug from	ee workplace program we pro	esently have, or put into	effect?
do you have a valid drivers license?	are you willing to supply us wi	ith a state issued report	of your driving record?
if hired, when would you be able to start? _			

## **Employment History**

Beginning with your present employer

From/ to				
date month year date	month year	company name		
Company addre	ss gros	gross pay - hourly? salary? Commission? Salary plus commission?		
City and state	wh	why did you leave, or why are you looking to leave the company?		
From/ to/	/			
date month year date	month year	company name		
Company addre	ss gros	gross pay - hourly? salary? commission? salary plus commission?		
City and state	<u></u>	why did you leave the company?		
From/ to/				
date month year date	month year	company name		
Company addre	ss gros	gross pay - hourly? salary? commission? salary plus commission?		
City and state		why	did you leave the company?	
May we contact all your past empl	overs? and your	present employer?		
name of a non-family member	length of time known	Service Advisor and relationship	area code and phone number	
name of a non-family member	length of time known	relationship	area code and phone number	
name of a non-family member	length of time known	relationship	area code and phone number	
name of a non-family member	length of time known	relationship	area code and phone number	
name of a non-family member	length of time known	relationship	area code and phone number	
	Acknowledgeme	nt and Author	<u>ization</u>	
	IMPORTAN	T INFORMATION!		
be terminated at any time, for any the authority to enter into an Emplo any such employment. I certify that	cause, without notice. I fur syment agreement with m to the best of my knowled Il statements contained in	rther understand tho e, or make any guar dge all of the informathis this application and	nd I understand that any employment can it no person other than the business owner had antee as to the length, terms or conditions of ation contained in this application is correct. I I understand that any misrepresentation, dismissal.	
at anno anthony		i application	# social security number	
signature		application	social security number	