

Employment Application

VELASQUEZ[®] COMPLETE AUTO CARE is an equal opportunity employer. All applicants will be considered regardless of race, color, religion, sex, national origin, age, marital, or veteran status; disability; or any other legally protected status.

Each question should be answered completely and accurately. **No action will be taken on this application until all questions have been answered and the application has been signed and dated.** Verification of eligibility to work in the U.S. will be required if an employment offer is made.

- Employment Information

Name: _____
Last First M.I.

Address: _____
Street Apt. # City State Zip Code

Home Phone: _____ Cell Phone: _____

Driver's License #: _____ State: _____ Exp. Date: _____

Applied for position(s): _____ Have you applied before: Yes No

Are you able to work? Full-time Part-time Temporary

Are you employed now? Yes No What date would you be available for work? _____

Are you over the age of 18? Yes No Are you authorized to work in the U.S.? Yes No

- Education

	High School	College/University	Graduate/Professional
School Name			
Diploma/Degree			
Year Graduated			
Honors Received			
Describe Course of Study			

- Job Experience

Employer: _____ Phone #: _____

Address: _____

Job Title: _____ Supervisor: _____

Employment Dates: _____ to _____ Salary: Start _____ Final _____

Duties: _____

Reason for leaving: _____ Can we contact this employer? Yes No

Employer: _____ Phone #: _____

Address: _____

Job Title: _____ Supervisor: _____

Employment Dates: _____ to _____ Salary: Start _____ Final _____

Duties: _____

Reason for leaving: _____ Can we contact this employer? Yes No

- References

Name	Company	Job Title	Phone #
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- Acknowledgements

Accuracy of Information. I certify that the information in this application is correct to the best of my knowledge. I understand that any misrepresentation or omission of any fact in my application, resume, or any other materials, or during interviews is grounds for disqualification from further consideration for employment, or for termination if employed.

Information Release. I hereby authorize VELASQUEZ® COMPLETE AUTO CARE or its agents to make an investigation of my employment and personal history through any investigative or credit agencies of its choice. I give my full consent for all contacted persons, including former employers, to provide the information concerning this application. Further, I waive my right to bring a claim against these individuals for any damages arising from furnishing the requested information to VELASQUEZ® COMPLETE AUTO CARE. I also release VELASQUEZ® COMPLETE AUTO CARE from all liability that might result from checking such references.

No Contractual Relationship. I also understand that neither this application nor a commitment of employment by VELASQUEZ® COMPLETE AUTO CARE constitutes a contract of employment. If a contract is to exist, that document will be executed in writing by the owner of VELASQUEZ® COMPLETE AUTO CARE.

AT-WILL EMPLOYMENT. I UNDERSTAND THAT IF I AM HIRED, MY EMPLOYMENT AT VELASQUEZ® COMPLETE AUTO CARE IS "AT-WILL" AND MAY BE TERMINATED BY ME OR BY VELASQUEZ® COMPLETE AUTO CARE AT ANY TIME FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. I UNDERSTAND THAT NO EMPLOYMENT OFFER IS BEING MADE BY VELASQUEZ® COMPLETE AUTO CARE AT THIS TIME. I ALSO UNDERSTAND THAT NOTHING IN THIS APPLICATION IS INTENDED TO IMPLY OR CREATE AN EMPLOYMENT CONTRACT AND THAT NO VELASQUEZ® COMPLETE AUTO CARE REPRESENTATIVE HAS THE AUTHORITY TO MAKE ANY ASSURANCE TO THE CONTRARY.

Signature: _____

Date: _____