Application for Employment

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment services and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant Name(First/Middle/Last): _			Date:	
Address:City:			State/Zip code:	
Telephone #:	Email:			
Position(s) applied for or type of work	c desired:			
Type of employment desired:	f employment desired: Full-time Part-time		Temporary	7
Salary desired:				
Date you will be available to start wor	·k:			
Are you able to meet the attendance requirements?			Yes	No
Do you have any objection to working mandatory overtime?			Yes	No
Can you travel if required by this position?			Yes	No
Have you ever been previously employed by our organization?			Yes	No
Can you submit proof of legal employment authorization and identity?			Yes	No
Are you 18 years old or older?			Yes	No
Have you ever been convicted of a crime in the last 7 years?			Yes	No
If yes, please explain (a conviction wi	ll not automatically bar em	nployment):		
Drivers license number (if driving is a	n essential job duty):			
How were you referred to us?				

Employment History

Please provide all employment information for your past four employers starting with the most recent.

Employer:		Position held:	
Address:		Telephone #:	
Immediate supervisor and title:			
Dates employed from	to	Pay Rate:	
Job Summary:			
Employer:		Position held:	
Address:		Telephone #:	
Immediate supervisor and title:			
Dates employed from	to	Pay Rate:	
Job Summary:			
Reason for leaving:			

Employer:		Position held:	
		Telephone #:	
Immediate supervisor and title:			
Dates employed from	to	Pay rate:	
Job Summary:			
Reason for leaving:			

Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

Educational History

List School name and location, years completed, course of study, and any degrees earned:

ligh School:
College:
Cechnical Training:
Dther:

References

List 3 references names, telephone numbers, and years known (do not include relatives or employers):

Name	Phone #
Name	Phone #
Name	Phone #

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant's signature:

CANDIDATE ACKNOWLEDGMENT

I ______ acknowledge that if I am offered employment at Studio Hotrods, Inc., it is on a probationary basis for 90 days. If after 90 days all requirements are met, Regular Full Time employment can be extended. I further understand that as a probationary employee, I am not eligible for any company benefits.

AT WILL DISCLAIMER FOR EMPLOYMENT APPLICATION FORM

I understand that all facts contained in this application are true and complete to the best of my knowledge. I understand that omission or misrepresentation of the facts may be grounds for rejection for this application, or dismissal from employment if subsequently discovered.

I authorize investigation of all statements contained herein, and of the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing same to you. Background employment verification resources may include but are not limited to: past employers, personal references, school/universities, drivers license check, criminal history, social security, and credit bureau.

EMPLOYMENT -AT- WILL

The State of Illinois is regarded as an employment-at-will state. This means that an employment relationship with no specified duration may be terminated at any time by either the employer or employee, with or without notice, and for any reason.

Employment at Studio Hotrods, Inc. is on an "At-Will" basis. Only the President of the company can change your employment status and only by written agreement.

In consideration of my employment, I agree to comply with all rules, regulations, and employment policies of the company.

Signature of applicant

Today's date