

APPLICANT NAME:

DATE:



13063 HWY 288B Angleton, TX 77515 979-849-5485
WWW.ALLACCESSOFFROAD.COM

APPLICATION FOR EMPLOYMENT AUTOMOTIVE MECHANIC

We are an equal opportunity employer and do not 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 program is available to all persons, those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

PERSONAL DATA

Last Name

First Name

Middle Name

Address

City

State

Zip Code

How long at current residence?

Years

Months

Home Phone

Cell Phone

Email Address

Social Security Number

Type of Employment:

Salary/Wage Expectations:

How did you find out about this position?

When would you be able to start?

Why do you feel you are qualified for this position?

Are you currently employed?

If so, where?

Do you have a valid driver's license?

State:

Number:

Expiration:

Have you ever been convicted of any crime(s), either misdemeanor or felony (other than minor traffic infractions)?
If yes, please provide explanation:

APPLICANT NAME:

DATE:

WORK EXPERIENCE

List your last 4 employers, include any military experience.

If presently employed, may we contact your present employer?

CURRENT POSITION

Name and Address

City, State, Zip

Telephone

Supervisor

Position Held

Date Started

Main Duties:

Reason for wanting to leave.

Current Rate of Pay

2ND LAST POSITION

Name and Address

City, State, Zip

Telephone

Supervisor

Position Held

From | To

Main Duties:

Reason for wanting to leave.

Final Rate of Pay

3RD LAST POSITION

Name and Address

City, State, Zip

Telephone

Supervisor

Position Held

From | To

Main Duties:

Reason for wanting to leave.

Final Rate of Pay

4TH LAST POSITION

Name and Address

City, State, Zip

Telephone

Supervisor

Position Held

From | To

Main Duties:

Reason for wanting to leave

Final Rate of Pay

Please explain any gaps in your employment history.

APPLICANT NAME:

DATE:

PROFESSIONAL REFERENCES

Name of Reference	Time Known	Phone	Email Address
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Name of Reference	Time Known	Phone	Email Address
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Name of Reference	Time Known	Phone	Email Address
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PERSONAL REFERENCES

Only list people you have known for more than one year.

Name of Reference	Time Known	Phone	Email Address
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Name of Reference	Time Known	Phone	Email Address
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Name of Reference	Time Known	Phone	Email Address
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EDUCATION

Name of School	Location	Graduated Yes or No	Completed Years / Mo.	Degree Received	Major Subject
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High
School

Business
or Trade
School

College or
University

Do you plan to continue your education? If yes, when?

Do you have any physical problems that will restrict your abilities to service and repair cars, such as lifting heavy objects like wheel's, cylinder heads, etc. or bending over for long periods of time while working under hoods of vehicles, color blindness, eye issues, hearing issues?

If yes, please explain:

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SKILLS AND EXPERIENCE ASSESSMENT

Rate your experience level for each of the following with 0 being no experience and 5 being very experienced.

Lift Kit Installation

Lowering Kit Installation

Computer Diagnostic

Suspension Service

Ring and Pinion Service and Gear Changes

Transmission Service and Rebuilds

Diesel repair and service

Transfer Case Service and Rebuilds

Custom Bumper Installation

Tonneau Cover Installation

Shock and Strut Installation

Winch Installation

Custom Fabrication

Spray-in Bedliner

Diesel and Gas Performance

Welding

Automotive Electrical Diagnose & Repair

Do you have any additional skills related to this position that we should consider?

RELEASE AND AUTHORIZATION STATEMENT

The information given is true and correct, and I understand that if I am employed, any misrepresentation, false statement, or omission of consequence herein, found by you at the time, will be sufficient cause to terminate my employment. I authorize the verification of any and or all information as listed above. As a condition of employment, if employment is offered, I must be authorized to work in the U.S. and demonstrate that authorization as required by the Immigration reform and Control Act of 1986.

I also understand that neither the application nor a commitment of employment by All Access Offroad constitutes a contract of employment. If a contract is to exist, that document will be executed in writing by All Access Offroad. I understand that this application for employment is valid for no more than 60 days. After that, I must resubmit an application in order to be considered for positions with All Access Offroad.

Applicant Signature

Name

Date

Email completed application to: OfficeManager@AllAccessOffroad.com