



APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

PERSONAL INFORMATION				
<hr/>	<hr/>	<hr/>	Email Address	
Last Name	First Name	Middle Initial		
<hr/>			Home Telephone Number	
Address	City	State	Zip	
<hr/>		<hr/>		Cell Telephone Number
What is your Date of Birth? ____/____/____		Are you a legal citizen of the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO		

GENERAL INFORMATION	
Position(s) Desired:	Classification Desired: Full-time Part-time Seasonal <i>(circle all that apply)</i> Winter Summer
Do you have any relatives or friends who currently work for Premier Motorsport Industries? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list. _____	When are you available to begin working?
Have you ever applied at or worked at Premier Motorsport Industries? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, when and in what capacity? _____	Rate of desired pay: \$ _____ per <i>(check one)</i> <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Yearly
Have you ever been convicted of a criminal offense? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please explain including date, place, and conviction(s). _____	Do you have any felony charges pending against you? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please provide place and charge(s). _____
Do you have a current Michigan Driver's License? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, why? _____	
Do you have a Michigan Motorcycle Mechanic License? <input type="checkbox"/> YES <input type="checkbox"/> NO _____	
Do you have a Motorcycle Endorsement? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Has your license ever been suspended or revoked? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, why? _____	

JOB-RELATED SKILLS AND ABILITIES
Please list any skills you have that pertain to the position you are applying for:
Please list any additional career training and/or qualifications:

EDUCATION

School Type	School Name & Location	Years Attended	Major/Degree Received	Did you graduate?	G.P.A.
High School				<input type="checkbox"/> YES <input type="checkbox"/> NO	
College				<input type="checkbox"/> YES <input type="checkbox"/> NO	
Other				<input type="checkbox"/> YES <input type="checkbox"/> NO	

Have you attended any continuing education programs related to the job for which you are applying within the past two years? If so, please list:

WORK EXPERIENCE - Please list below present and past employment, beginning with the most recent. Do not indicate "See Resume".

Company Name: _____ Location: _____ Supervisor: _____ Phone Number: _____	Date Range of Employment	Position(s) & Duties	Employment Status <i>(check one)</i> <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal	Rate of Pay \$ _____ per <i>(check one)</i> <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Yearly
Reason for leaving:	May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, please explain.			
Company Name: _____ Location: _____ Supervisor: _____ Phone Number: _____	Date Range of Employment	Position(s) & Duties	Employment Status <i>(check one)</i> <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal	Rate of Pay \$ _____ per <i>(check one)</i> <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Yearly
Reason for leaving:	May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, please explain.			
Company Name: _____ Location: _____ Supervisor: _____ Phone Number: _____	Date Range of Employment	Position(s) & Duties	Employment Status <i>(check one)</i> <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal	Rate of Pay \$ _____ per <i>(check one)</i> <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Yearly
Reason for leaving:	May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, please explain.			

REFERENCES - Please do not list any relatives.

Name	Address	Phone	Occupation	Yrs. Known
1.				
2.				
3.				

MILITARY RECORD

Do you have any service in the U.S. Armed Forces? YES NO If yes, please complete below.

Branch: _____ Dates of Service: _____ Rank on Discharge: _____

Special Skills acquired during training: _____ Reserve Status: _____

APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION

I voluntarily give Premier Motorsport Industries, LLC the right to make a thorough investigation of my background, current and past employment and education, and credentials and qualifications and I agree to cooperate in any such investigation(s). I acknowledge that Premier Motorsport Industries, LLC relies upon the accuracy of information contained in the employment application, as well as the accuracy of other data presented, verbally or in writing, throughout the hiring process and the employment relationship and therefore authorize the above investigations during the hiring process and at any other time during the employment relationship.

I understand that, if employed, I will be required to follow and comply with the policies and procedures of Premier Motorsport Industries, LLC and that failure to do so may lead to the termination of my employment. I further understand that Premier Motorsport Industries, LLC reserves the right to change, revise, add or delete policies and procedures as necessary, and I will be obligated to conform to such changes.

I understand and agree that Premier Motorsport Industries, LLC reserves the right to require an employee to submit to drug or alcohol testing as part of its pre-employment screening. I consent to submit to drug or alcohol testing as a condition of employment and/or continued employment. I acknowledge that remaining free of illegal drug use is a condition of my employment.

I hereby certify that the above information supplied by me is true and complete. I agree that if employed, discovery of any misrepresentation, falsification, or omission of facts on this Application for Employment or otherwise provided by me shall justify immediate termination of my employment at the discretion of Premier Motorsport Industries, LLC.

<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> Signature of Applicant	<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> Date
-----------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------