

SURDYKE FAMILY OF DEALERSHIPS EMPLOYMENT APPLICATION

PERSONAL INFORMATION

NAME (Last, First, Middle)		DATE	
PRESENT ADDRESS	(City)	(State)	(Zip Code)
PHONE NUMBER	SOCIAL SECURITY NUMBER		

EMPLOYMENT DESIRED

DEALERSHIP	POSITION
AVAILABLE START DATE	SALARY DESIRED
ARE YOU EMPLOYED NOW?	MAY WE CONTACT YOUR EMPLOYER?

EDUCATION

School Name	Location	Graduated		Degree
HIGH SCHOOL		YES	NO	
COLLEGE OR UNIVERSITY				
OTHER TRAINING				

OTHER INFORMATION

SPECIAL TRAINING
ACTIVITIES (Civic, Athletic, Etc.)

EMPLOYMENT HISTORY

List the last four employers, starting with present or most recent

MONTH/YEAR	NAME AND ADDRESS	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

By signing this applicant waiver document the applicant is authorizing the procurement of a consumer report by this company as part of the pre-employment background investigation. If hired, this authorization shall remain on file and shall serve as an ongoing authorization to procure consumer reports at any time during my employment period. Additionally, by signing this document this company is disclosing to you that a consumer report, including an investigative consumer report containing information as to your character, general reputation, personal characteristics, public record information, previous employer reviews, education records, criminal history, personal references, driving records, credit, and mode of living may be obtained from Federal, State, and other agencies, companies and other organizations for employment purposes as part of the pre-employment background investigation and at any time during your employment. If this company considers any information in the "consumer report" when making an employment related decision that directly and adversely affects you, you will be provided with a copy of the "consumer report" before the decision is finalized. You will also be provided a written summary of your rights under the Fair Credit Reporting Act.

I authorize, without reservation, any party or agency contacted by this company, employees, agents, and assigns to furnish the above information.

I hereby release and discharge this company and the Consumer Reporting Agency(s) (CRA) requesting, investigating, and/or providing information and/or consumer report(s) and their employees, agents, successors, and assigns, from any and all liability that may arise out of the investigative and/or consumer report of my background as set forth herein.

I certify that the facts contained in this application are true to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. Further, I understand and agree that I will be required to take and pass a drug test as a condition of hiring and/or continued employment. (Drug testing includes pre-employment, random, for cause, and post accident). I agree to consent to take such test(s) at such time as designated by this company and to release to this company, its agents, officers, or employees from any claim arising in connection with the use of such test(s).

I understand and agree that if hired, my employment is for no definite period and may regardless of the date of payment of my wages and/or salary, be terminated, with or without cause, at the option of either the company or myself at will.

NOTE: All applications remain active for six (6) months. After this period of time, applicant must submit a new application. Please sign below to signify receipt of the foregoing disclosures.

Signature _____

Date _____