

(PLEASE PRINT LEGIBLY)

## APPLICATION FOR EMPLOYMENT

We appreciate your interest in our organization. AAA is an equal opportunity employer committed to workforce diversity. We adhere to a policy of making employment decisions without regard to race, color, age, sex, religion, national origin, disability, veteran status, citizenship status, or marital status. Please advise us if you need assistance/accommodation in completing the application or in any stage of the employment process.

**PERSONAL** 

| Name (Last)  | (First)                         |                         | (Middle)  |            | Are you at least 18 years of age?  ☐ Yes |              |       |
|--|---------------------------------|-------------------------|---|------------|--|--------------|-------|
|  |                                 |                         |   |            |  |              | □ Yes |
| Present Address  |                                 |                         | City  |            | State                                    | Zip Code     |       |
| Present Address  |                                 |                         | City  |            | State                                    | Zip Code     | ,     |
|  |                                 |                         |   |            |  |              |       |
| Telephone  |                                 |                         | Email Address   |            |  |              |       |
|  |                                 |                         |   |            |  |              |       |
| State the specific position for which you are a  | applying for:                   |                         |   |            |  |              |       |
|  |                                 |                         |   |            |  |              |       |
| Are you interested in:   | Full Time                       | Part Tim                | ie 🗌 .  | Seasonal [ |  | 1            |       |
| Days/hours available to work:  |                                 |                         |   |            | Sa                                       | lary Desired |       |
| Number of hours desired:   | *                               |                         | -   |            |  |              |       |
|  |                                 |                         |   |            |  |              |       |
|  |                                 |                         |   |            |  |              |       |
|  |                                 | REFERRAI                | LSOURCE   |            |  |              |       |
| How were you informed of employment opp  | ortunities at AAA? (Internet Po | osting, Employee Refe   | rral, etc.)   |            |  |              |       |
|  |                                 |                         |   |            |  |              |       |
| If employee referral, please state name of em  | ployee:                         |                         |   |            |  |              |       |
|  |                                 |                         |   |            | •  | ۸.           |       |
|  |                                 | GENERAL (               | UESTIONS  |            |  |              |       |
| Have you previously been employed by AAA   |                                 |                         |   | r          | •,                                       |              |       |
|  |                                 |                         |   |            |  |              |       |
|  |                                 |                         |   |            |  | 10           |       |
| For reference checking purposes, is there and  | other name you are known by:    | Li Yes Li No If y       | es, please provide  | -          |  |              |       |
|  |                                 |                         |   |            |  |              |       |
| Are you able to perform the essential function with or without a reasonable accommodation  |                                 | described in the job d  | escription or as demonstrated by  | y the com  | pany representative                      |              |       |
| with of without a reasonable accommodation   | ir 🗀 ies 🗀 No                   |                         |   |            |  |              |       |
| Some AAA employees are required to travel  | from time to time. Are there as | ny factors that would r | prevent you from traveling?   | Yes F      | ] No                                     |              |       |
| The state of the s |                                 | - January               | , and the same of |            |  |              |       |
|  |                                 |                         |   |            |  |              | ×,    |
| If hired, can you provide verification of your   | legal right to work in the Unit | ted States?             | □ No  |            |  |              |       |
|  |                                 |                         |   |            |  |              |       |
| Do you have any employment restrictions re   | sulting from a non-compete or   | confidentiality agreen  | nent?   |            |  |              |       |
|  |                                 |                         |   |            |  |              |       |
|  |                                 |                         |   |            |  |              |       |

Initial and Date:\_\_\_

## **EDUCATION**

| Name and Location of School  |
|--|
| High School (GED)  |
|  |
|  |
| College University   |
|  |
|  |
| College University   |
|  |
| College University   |
|  |
|  |
| Technical or Trade School  |
|  |
|  |
| If currently enrolled, name of school  |
|  |
| Certification, Professional Designations, or Licenses relevant to the position. List any special skills or qualifications that may be relevant to the position for which you |
| are applying.  |
| MILITARY   |
| Are you a veteran of the United States military?  Yes No If yes, please describe any special skills or training acquired while in the service.                               |
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| SKILLS - If applicable for position for which you are applying   |
|  |
| □ Proficiency in foreign language(s). If so, please indicate (Spanish, etc.)   |
|  |
| □ PC skills (indicate software used)   |
| ☐ Graphics Software  |
|  |
|  |
| □ Desktop Publishing   |
|  |
|  |
| ☐ Technical (languages, software, hardware, etc.)  |
|  |
| Typing Speed wpm   |
| □ Administrative skills that apply to the needs of this position. If so, please indicate: ————————————————————————————————————   |
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Initial and Date:\_\_\_

## **EMPLOYMENT HISTORY**

Please complete in detail starting with present or most recent employer. List all previous employers, include self-employment, military service, summer, part-time employment or periods of unemployment. Attach additional sheets as necessary. A resume should not be used in place of completion of application.

| Present or most recent position (1)    |  |                                       |   |                         | Street Control |                 |  |
|--|--|---------------------------------------|---|-------------------------|----------------|-----------------|--|
| From (Mo/Yr) to (Mo/Yr)                | Position   |                                       |   | Beginning Salary<br>per | 7              | Last Salary per |  |
| Company Name                           |  | , , , , , , , , , , , , , , , , , , , | Type of Business                                  |                         | Phone          |                 |  |
| No. and Street                         |  | City                                  |   | State                   |                | Zip Code        |  |
| Briefly describe your duties           |  |                                       |   |                         |                |                 |  |
| Name of Last Supervisor                | ame of Last Supervisor Reason(s) for leaving or seeking other employment |                                       |   |                         |                |                 |  |
| May we contact for reference purposes? | ☐ Yes ☐ No If no, please ex  | xplain:                               |   |                         |                |                 |  |
|  |  |                                       |   |                         |                |                 |  |
| Present or most recent position (2)    |  |                                       |   |                         |                |                 |  |
| From (Mo/Yr) to (Mo/Yr)                | Position   |                                       | 1 1 10  | Beginning Salary per    |                | Last Salary per |  |
| Company Name                           |  |                                       | Type of Business                                  |                         | Phon           | e No.           |  |
| No. and Street                         |  | City                                  | State Zip Co                                      |                         | Zip Code       |                 |  |
| Briefly describe your duties           |  |                                       |   |                         |                |                 |  |
| Name of Last Supervisor                |  |                                       | Reason(s) for leaving or seeking other employment |                         |                |                 |  |
| May we contact for reference purposes? | ☐ Yes ☐ No If no, please ex  | xplain:                               |   |                         |                |                 |  |
| Present or most recent position (3)    |  |                                       |   |                         |                |                 |  |
| From (Mo/Yr) to (Mo/Yr)                | Position   |                                       |   | Beginning Salar         | y              | Last Salary     |  |
| Company Name                           |  |                                       | Type of Business                                  | per                     | Phon           | per<br>e No.    |  |
|  |  |                                       | Type of Business                                  |                         | Thon           |                 |  |
| No. and Street                         |  | City                                  |   | State                   |                | Zip Code        |  |
| Briefly describe your duties           |  |                                       |   |                         |                |                 |  |
| Name of Last Supervisor                |  |                                       | Reason(s) for leaving or seeking other employment |                         |                |                 |  |
| May we contact for reference purposes? | ☐ Yes ☐ No If no, please e   | xplain:                               |   | -                       |                | 45              |  |
| Present or most recent position (4)    |  |                                       |   |                         |                |                 |  |
| From (Mo/Yr) to (Mo/Yr)                | Position   |                                       |   | Beginning Salar         | y              | Last Salary     |  |
| Company Name                           |  |                                       | Type of Business                                  | per                     | Phor           | per ne No.      |  |
| N 104                                  |  | - CI                                  | *   |                         |                | la: a           |  |
| No. and Street                         |  | City                                  |   | State                   |                | Zip Code        |  |
| Briefly describe your duties           |  |                                       |   |                         |                |                 |  |
| Name of Last Supervisor                |  |                                       | Reason(s) for leaving or seeking other employment |                         |                |                 |  |
| May we contact for reference purposes? | ☐ Yes ☐ No If no, please e   | xplain:                               |   |                         |                |                 |  |
|  |  |                                       |   |                         |                |                 |  |

Initial and Date:

| Have you ever been convicted of a crime that has not been erased, expunged, impounded, or sealed by a court? Please limit your response to (1) misdemeanors and (2) all felonies. (A criminal record does not constitute an automatic bar to employment and will be considered only as it substantially relates to the job in question.)  □ Yes □ No If yes, please explain the nature of the crime, when it occurred and any subsequent rehabilitation.  |
|---|
| 11 yes, please explain the nature of the crime, when it occurred and any subsequent renabilitation.   |
| <u> </u>  |
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| Do you currently use illegal drugs? □ Yes □ No  |
| PLEASE READ THE FOLLOWING BEFORE SIGNING THIS APPLICATION:  |
| I understand that:  |
| I authorize the investigation of all statements contained in this application. I understand that falsification or omission of facts in this application is cause for dismissal.   |
| I understand that employment, if offered, is subject to my satisfying the employment and eligibility requirements of the Immigration Reform and Control Act of 1986.  |
| I authorize AAA to contact my current and former schools, references and previous employers to verify the information I have provided in the application and interview process as well as information as to my performance, attendance record and separation reason. I release all parties from liability or damages incurred as a result of this inquiry and furnishing this information.  |
| I authorize AAA to request the preparation of an investigative report that may include information relating to my criminal record, motor vehicle record, and my character in connection with my application for employment. Should I become employed by AAA, I hereby authorize AAA permission to request the preparation of an investigative consumer report at any time during my employment.   |
| I understand that if I am offered a position with AAA, the offer will be for employment on an at-will basis. That is, the employment relationships is not guaranteed for any specific period of time and may be ended by AAA or me at any time, with or without notice or cause. In consideration of my employment, I agree to conform to the rules and regulations of AAA.   |
| In understand that during my employment, I may be asked to transfer to a different location within the AAA.   |
| I understand that I may be required to take a physical examination or other examinations or tests as may be required by the performance of my duties at AAA expense to assist my employment eligibility.  |
| I understand that because of the nature of the business conducted by AAA, all information, whether written, spoken or otherwise communicated or obtained, and all files and records of any and every description, relating to the business of AAA or to anyone with whom AAA has dealings, constitutes privileged matters and are to be treated in a strictly confidential manner. I fully understand and agree that should I enter the employment of AAA, I am not to, and will not at any time, communicate or reveal any business of AAA or any such information or records of files or the matters contained therein, to unauthorized personnel within AAA, nor to anyone outside AAA. I also understand that any violation of the foregoing shall be sufficient grounds for termination of my employment, if still employed. |
| I affirm that everything is true and correct, and I acknowledge that I can be terminated any time if it turns out that any information I supply is false. I have read in full and agree to abide by the above statements and conditions of employment, if hired.  |
|   |
| Signature Date  |