

## Pat Armstrong Ford, Inc.

### APPLICATION FORM

**PLEASE PRINT**

Name (Last)	(First)	(Middle Initial)
Street Address		City, State, Zip Code
Telephone (Home) (Mobile)		<b>Position Desired:</b>
Are you legally eligible for employment in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Rate of pay desired: \$
Are you over age 18? <input type="checkbox"/> Yes <input type="checkbox"/> No		
When will you be available for work? _____ / _____ , _____ (Month) (Day) (Year)		
How were you referred to the Pat Armstrong Ford Inc.? <input type="checkbox"/> Employment Referral: (Name of Employee) _____ <input type="checkbox"/> Advertisement (Name of Newspaper) _____ <input type="checkbox"/> Own Accord: _____ <input type="checkbox"/> Agency: (Name of Agency) _____ <input type="checkbox"/> Other: _____		
Have you previously been employed by Pat Armstrong Ford? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give dates: _____		
Have you ever been convicted of a crime, other than a minor traffic offense? A conviction will not necessarily disqualify you for employment. Related factors such as seriousness, nature of the crime and rehabilitation will be considered. Yes No		If yes, please describe conditions: _____
<p>EQUAL EMPLOYMENT OPPORTUNITY. Pat Armstrong Ford Inc. is an equal opportunity employer. Pat Armstrong Ford Inc. does not discriminate against applicants or employees on the basis of race, color, sex, religion, marital status, national origin, age, veteran status, disability, genetic information or other protected classification. This policy of nondiscrimination extends to all terms conditions and privileges of employment and to all personnel actions.</p>		

### EDUCATION

	Name and Address of School	Number of Years Completed	Graduated	Major/Degree
High School			Yes No	
College			Yes No	
College			Yes No	
Business or Trade			Yes No	
Other			Yes No	

Describe any educational course(s), program(s) you are currently enrolled in. Also indicate the target date for completion:

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**EMPLOYMENT BACKGROUND**

List below all current and former employers, beginning with the most recent. Account for <b>ALL</b> periods between jobs. Attach separate sheets if necessary.				
<b>1</b>	Company	From Mo/Yr	To Mo/Yr	Supervisor
Address (City and State <b>Only</b> )				
Titles and Duties		Salary Starting Ending		
Telephone #:		Reason for Leaving		
<b>2</b>	Company	From Mo/Yr	To Mo/Yr	Supervisor
Address (City and State <b>Only</b> )				
Titles and Duties		Salary Starting Ending		
Telephone #:		Reason for Leaving		
<b>3</b>	Company	From Mo/Yr	To Mo/Yr	Supervisor
Address (City and Sate <b>Only</b> )				
Titles and Duties		Salary Starting Ending		
Telephone #:		Reason for Leaving		
<b>4</b>	Company	From Mo/Yr	To Mo/Yr	Supervisor
Address (City and State <b>Only</b> )				
Titles and Duties		Salary Starting Ending		
Telephone #:		Reason for Leaving		
<b>5</b>	Company	From Mo/Yr	To Mo/Yr	Supervisor
Address (City and Sate <b>Only</b> )				
Titles and Duties		Salary Starting Ending		
Telephone #:		Reason for Leaving		
Please check employers you would like us to contact and/or send the <b>EMPLOYMENT BACKGROUND VERIFICATION FORM:</b> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5.				
Explain why you are interested in working for [Dealership]: _____ _____ _____				
Are there any other experiences, skills, or qualifications which you feel would especially qualify you for work at [Dealership]? (e.g. word processing, Language, computer, sales experience, technician certifications, etc.) _____ _____ _____				

Have you ever been terminated or asked to resign from any job?  Yes  No.

If Yes, please explain circumstances: \_\_\_\_\_

\_\_\_\_\_

May we contact your current employer?  Yes  No. If No, please explain: \_\_\_\_\_

\_\_\_\_\_

Please indicate any actual experience, training and qualifications that you have, which you feel are relevant to the position for which you are applying. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If hired, can you furnish proof that you are over 18 years of age?  Yes  No

Are you capable of satisfactory performing the essential job duties required of the position for which you are applying?  Yes  No

Do you have adequate transportation to and from work?  Yes  No

**PERSONAL REFERENCES**

Please list persons who know you well – not previous employers or relatives

Name	Occupation	Address (Street, City and State)	Telephone Number	Number of Years Known

**DRIVING INFORMATION**

Do you have a current driver's license? \_\_\_\_\_ Yes \_\_\_\_\_ No State: \_\_\_\_\_

License number \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Has your driver's license ever been suspended or revoked: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain circumstances: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been cited in any state for driving under the influence (DUI) or diving while intoxicated (DWI)?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain circumstances and out come: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all traffic violations for the last 3 years and accidents for the last 5 years: \_\_\_\_\_

Offense	Date	Offense	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**EMERGENCY INFORMATION**

In case of an accident or other emergency, who should we contact?

Name \_\_\_\_\_ Relation \_\_\_\_\_

Home Address \_\_\_\_\_  
Street City State Zip

Telephone ( ) \_\_\_\_\_

Work Address \_\_\_\_\_  
Street City State Zip

Telephone ( ) \_\_\_\_\_

Although the Company may keep this application on file indefinitely, this application will be considered current and active for only (30) days. If you wish to be considered for employment after that time, you must re-apply.

I certify that all of the information that I have provided on this application is true and accurate.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

## APPLICANTS STATEMENTS & AGREEMENT

In the event of my employment to a position in this Company, I will comply with all rules and regulations of this Company. I understand that the Company reserves the right to require me to submit to a test for the presence of drugs in my system prior to employment and at any time during my employment, to the extent permitted by law. I also understand that any offer of employment may be contingent upon the passing of a physical examination and a test for the presence of alcohol in my system, performed by a doctor selected by the Company. Further, I understand that at any time after I am hired, the Company may require me to submit to a physical examination and an alcohol test, to the extent permitted by law. I consent to the disclosure of the results of any physical examination and related tests to the Company. I also understand that I may be required to take other tests such as personality and honesty tests, prior to employment and during my employment. I understand that should I decline to sign this consent or decline to take any of the above tests, my application for employment may be rejected or my employment may be terminated.

I understand that bonding may be a condition of hire. If it is, I will be so advised either before or after hiring and a bond application will have to be completed.

I understand that the company may investigate my driving record and my criminal record and that an investigative consumer report may be prepared whereby information is obtained through personal interviews with my neighbors, friends, personal references, and others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written inquiry within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records and information pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees and representatives, as well as other individuals who release information to the Company, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me.

I authorize the persons named herein as personal references to provide the Company with a pertinent information they may have regarding myself.

I hereby state that all the information that I provided on this application or any other document filled out in connection with my employment and in any interview is true and correct. I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that if I am employed and any such information is later found to be false or incomplete in any respect, I may be dismissed. I understand if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and the federal immigration laws require me to complete an I-9 Form in this regard.

**If hired, I agree as follows: My employment and compensation is terminable at-will, is for no definite period, and my employment and compensation may be terminated by the Company (employer) at any time and for any reason whatsoever, with or without good cause at the option of either the Company or myself. No implied, oral or written agreements contract to the express language of this agreement are valid unless they are in writing signed by the President of the Company. No supervisor or representative of the Company, other than the President of the Company has any authority to make any agreements contrary to the foregoing. This agreement is the entire agreement between the Company and the employee regarding the rights of the Company or employee to terminate employment with or without good cause, and this agreement takes the place of all prior and contemporaneous agreements, representations, and understandings of the employee and the Company.**

I further agree that except for claims for injunctive relief relating to trade secrets, claims brought under the National Labor Relations Act, which are brought before the National Labor Relations Board and claims for medical and disability benefits under the states Workers' Compensation Act, I agree that any claim, dispute, or controversy which would be between myself and the Company (or its owners, directors, and offices, employees, agents, and parties with its employee benefit and health plans) arising from, related to, or having any relationship or connection whatsoever with my seeking employment by, or other association with, the Company, whether based on tort, contract, statutory, or otherwise shall be submitted to and determined exclusively by binding arbitration under the Federal Arbitration Act, in conformity with the procedures of the Revised Code Washington, Section 7.04 et seq.; provided, however, that: In addition to requirements imposed by law, any arbitrator herein shall be retired Washington Superior Court Judge and shall be subject to disqualification on the same grounds as would apply to a judge so such court. Moreover, all rules of discovery, pleading (including the right of dismissal and summary judgment), evidence and all rights to resolution of the dispute by means of motions for summary judgment and judgment on the pleadings in Washington courts shall apply. Resolution of the dispute shall be based solely upon the law governing the claims and defenses pled, and the arbitrator may not invoke any basis (including, but not limited to, notions of "just cause") other than such controlling law. As reasonably required to allow full use and benefit of this agreement's modifications to the Act's procedures, the arbitrator shall extend the times set by the Act for the giving of notices and setting of hearings. Awards shall include the arbitrator's written reasoned opinion and, at either party's written request within 10 days after issuance of the award, shall be subject to reversal and remand, modification, or reduction following review of the record and agreements of the parties by a second arbitrator who shall, as far as practicable, proceed according to the law and procedures applicable to appellate review by the Washington Court of Appeal of civil judgment following court trial. Should any portion, word, clause, phrase, sentence or paragraph of this Agreement be declared void or unenforceable, such portion shall be considered independent and severable from the remainder, the validity of which shall remain unaffected. I understand by agreeing to this binding arbitration provision, both I and the Company give up our rights to trial by jury.

**If I have any questions regarding this statement, please ask a Company representative before signing. I hereby acknowledge that I have read the above statements and understand the same.**

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT & AGREEMENT**

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

**EMPLOYMENT BACKGROUND VERIFICATION FORM**

**Applicant Information (Please complete and sign)**

I, (print name) \_\_\_\_\_ give you and your company permission to release the requested information find below, with the Pat Armstrong Ford Inc. for only this time, for the purpose of pre-employment screening process.

Applicant's Phone Number: \_\_\_\_\_

My signature below indicates my consent.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Employment Background verification (For Office use Only)**

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Was the applicant an employee of your company? Yes \_\_\_\_\_ No \_\_\_\_\_

When? Start Date \_\_\_\_\_ End Date \_\_\_\_\_

What was the applicant's position on the last day of employment? \_\_\_\_\_

What were the applicant's job responsibilities? \_\_\_\_\_

What was the applicant's reason for leaving? \_\_\_\_\_

Would you rehire this applicant? Yes \_\_\_\_\_ No \_\_\_\_\_