COLORMATCH
Automotive Refinish Centers

EMPLOYMENT APPLICATION

EQUAL OPPORTUNITY EMPLOYER

DATE: _____

PERSONAL INFORMATION

NAME (LAST NAME FIRST)			SOCIAL SECURITY NO.	
PRESENT ADDRESS		CITY	STATE	ZIP CODE
HOME PHONE	CELL PHONE	BEST TIME TO CALL:	CHECK IF OVER 21: ☐	CHECK IF UNDER 21: ☐
EMAIL ADDRESS		PROVIDE BRIEF DETAILS IF EVER CONVICTED OF A CRIMINAL OFFENSE:		

EMPLOYMENT DESIRED

POSITION		DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED ☐ Yes ☐ No		IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? ☐ Yes ☐ No	
ARE YOU APPLYING FOR FULL-TIME WORK? ☐ Yes ☐ No		CHECK IF YOU HAVE RELIABLE WORK TRANSPORTATION: ☐	CHECK IF YOU HAVE VALID D/L: ☐

	NAME AND LOCATION OF SCHOOLS	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

GENERAL

SUBJECTS OF SPECIAL STUDY, RESEARCH WORK OR SPECIAL TRAINING AND SKILLS	
U.S. MILITARY OR NAVAL SERVICE	RANK

FORMER EMPLOYERS

(LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

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

(CONTINUED ON OTHER SIDE)

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REFERENCES

GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS KNOWN
1			
2			
3			

AUTHORIZATION

"I CERTIFY THAT THE FACTS CONTAINED IN THE APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THEIR REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE."

DATE _____ SIGNATURE SUBMIT _____

INTERVIEWED BY _____ DATE _____

DO NOT WRITE BELOW THIS LINE

REMARKS

HIRED	FOR DEPT	POSITION	WILL REPORT	SALARY WAGES

APPROVED BY: DATE: _____

HUMAN RESOURCES MANAGER | DEPARTMENT HEAD | GENERAL MANAGER