APPLICATION FOR EMPLOYMENT

Auxiliary aids and services are available upon request to individuals with disabilities.

Today's Date:		
PERSONAL		
Full Name:		
Address:		
Telephone Number:		
Are you 18 years of age or older? Yes \square No \square		
Are you legally authorized to work in the United States? Yes \Box No \Box		
EMPLOYMENT DESIRED		
Job Title:		
Date you can start:		
Wage desired:		
Are you available for work: Full-time \square Part-time \square		
EDUCATION		
Do you have a High School Diploma or GED? Yes \square No \square		
Name of last school attended:		
City, State:		
Last grade completed: □9 □10 □11 □12		
Highest degree earned: ☐ High School Diploma/GED ☐ Associate's Degree		
☐ Bachelor's Degree ☐ Master's Degree ☐ Other		
Other Training or Skills (Factory or Office Machines Operated, Special Courses, Computer Skills, etc.):		
EMPLOYMENT HISTORY		
List employers, starting with the current or most recent. Explain all gaps in time of employment.		
Company Name:		
Job Title:		
Start Date: End Date:		
Reason for Leaving:		

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Company Name:		
Job Title:		
Start Date:	End Date:	
Reason for Leaving:		
Company Name:		
Job Title:		
Start Date:	End Date:	
Reason for Leaving:		
May we contact your former employers? Yes \square No \square		
May we contact your present employer? Yes □ No □		
REFERENCES		
Please list three references we can call to ask about your suitability for employment.		
Name	Phone Number	
1.		
2.		
3.		
PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING		
I have disclosed all information that is relevant and should be considered applicable to my candidacy for employment.		
I understand, where permissible under applicable state and local law, I may be subject to a pre- employment drug test after receiving a conditional offer of employment, and must receive a negative result for illegal drug use before being permitted to commence work with Elite Octane.		

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Signature	Date	
MY SIGNATURE IS EVIDENCE THAT I HAVE READ	AND AGREE WITH THE ABOVE STATEMENTS.	
I certify that all of the above information is t falsification or omission of information may employment or, if hired, may result in terminal discovery.	disqualify me from further consideration for	
I understand that no representation, whether of Elite Octane, at any time, can constitute an further understand no representative or agent an agreement for employment for any specified policy, procedure, benefit, or other terms of document signed by the an authorized representation.	implied or express contract of employment. I of Elite Octane has the authority to enter into diperiod of time or to make any change in any r condition of employment other than in a	
I expressly understand and agree that, if employed, my employment, having no specified term, is based upon mutual consent and may be terminated at will, with or without cause, by either party (Elite Octane or me) without prior notice to the other, unless otherwise prohibited by law. Initials		
I hereby certify that, if employed, I will report management, if I am ever harassed by someon any unethical behavior by any employee.	•	
	Initials	
I understand employment with Elite Octane documentation necessary to establish my identif	, , ,	
I understand, where permissible under applicable employment background check after receiving a my criminal background, driving record, credit is suitability for employment. I understand that a provided to me prior to any background check.	conditional offer of employment to investigate nistory, and/or and other matters related to my	
employment medical examination after receiving meet the qualifications for the position, with a being permitted to commence work with Elite O	or without reasonable accommodation, before	