



Employment Application

APPLICANT INFORMATION (PLEASE PRINT)				
Last Name	First	M.I.	Date	
Street Address			Apartment/Unit #	
City	State		ZIP	
Phone	E-mail Address			
Date Available	Social Security No.		Desired Salary	
Position Applied for			Type of employment desired FT <input type="checkbox"/> PT <input type="checkbox"/>	
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	

EDUCATION				
High School		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor & Title	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor & Title	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor & Title	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	
DISCLAIMER AND SIGNATURE	
IMPORTANT -READ THE FOLLOWING CERTIFICATION AND AGREEMENT CAREFULLY BEFORE SIGNING .	
<p>In making this application for employment, I certify that the statements I have made are true, complete and correct, and I agree that any willfully false statements or misrepresentations herein, whenever discerned, are just cause for Hotard Coaches Inc. either to refuse or to terminate my employment. Further, I authorize any school or former employer to disclose to Hotard Coaches Inc. upon request any information they may have as to my record, performance, and attendance and will hold such schools and employers harmless for such disclosure. I agree to take the required drug screening test following an offer of employment. I understand that this application becomes void after 30 days unless renewed personally or in writing by me. I have read and do understand and subscribe to this certification and agreement.</p> <p>In consideration of my employment, I agree to conform to the rules and regulations of Hotard Coaches Inc., I also agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at my option or at the option of Hotard Coaches Inc. I understand that no employee or representative of Hotard Coaches Inc., other than the President of the company has any authority to enter into any agreement guaranteeing my employment for any specified period of time, nor to make any agreement contrary to the foregoing.</p>	
Signature	Date