

Quick Jet Car Wash

Application for Employment
We are an equal opportunity employer.
(Please Print Clearly)

PERSONAL INFORMATION

Name _____ Social Security No. _____
Street Address _____
First Name _____ Middle Initial _____ Last Name _____
Apt. No _____ Area _____ Telephone _____
Or Box _____ City _____ State _____ Zip _____ Code _____ Number _____
Are you 18 or Older? Yes No, if not Age _____ Do you have reliable Transportation to work? _____
In case of emergency, please contact: _____
Name _____ Address _____ Phone _____

GENERAL INFORMATION

Position Desired _____ Salary or Wage Desired _____
Are you employed now? _____ If so, may we inquire of your present employer? _____
Do you enjoy working with the general public? _____
When can you start work? _____ When must you quit to return to school? _____
Have you had a similar job? _____ If yes, please describe _____
Are you willing to work weekends during school? _____
Would you be willing to work night shift part time in the summer? _____
Have you ever been convicted of a crime other than traffic violations? No Yes
If yes, please explain _____
Please list any time during the summer which you would not be able to work (football practice, band camp, college registration, etc.) _____

"You are not required to disclose information about physical or mental limitations that you reasonably believe will not interfere with your capability to do the job. On the other hand, if you want the employer to consider special arrangements to accommodate a physical or mental impairment, you may identify that impairment in the space provided and suggest the kind of accommodation that you believe would be appropriate. The employer will not refuse to hire a disable applicant who is capable of performing the essential requirements of the job with reasonable accommodation."

EDUCATION

School most recently attended: _____
Address _____ City _____ State _____ Phone _____
Teacher or _____ Last Grade _____ Grade Point _____
Counselor _____ Dept. _____ Completed _____ Average _____
Graduated? Yes No Now Enrolled? Yes No Sports or Activities _____

WORK EXPERIENCE

Two most recent jobs: If not applicable, list personal references.

Employer's Name & Address/Phone No.	Dates Employed		Position Held
	From:	To:	
	Compensation		Name & Title of Supervisor
Starting:	Final:		
Employer's Name & Address/Phone No.	Dates Employed		Position Held
	From:	To:	
	Compensation		Name & Title of Supervisor
Starting:	Final:		

Please turn over and fill out the back of the page.

Initial _____

