

Center for Automotive Research

APPLICATION FOR EMPLOYMENT

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, citizenship, height, weight, handicap, or any other legally protected status.

(PLEASE PRINT)

Date of Application _____

Position(s) Applying For:

Referral Source:

Advertisement Friend Relative Walk-in Other _____

NAME

Last

First

Middle

Address

Number

Street

City

State

Zip Code

Telephone () _____

Area Code

Are you currently working?..... Yes No

If Yes, may we contact your current employer?..... Yes No

Are you prevented from lawfully becoming employed in this country because of
Visa or Immigration Status?..... Yes No
(Proof of citizenship or immigration status will be required upon employment.)

On what date would you be available for work? _____

Can you travel if the job requires it?..... Yes No

Have you been convicted of a felony?..... Yes No
(Conviction will not necessarily disqualify an applicant from employment.)

If Yes, please explain

Have you ever been employed by this organization before?..... Yes No

If yes, give dates employed and indicate if employed under a different name: _____

Please indicate the names of any relatives already employed by this employer: _____

Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the activities involved in the job or occupation for which you have applied? Yes No

EDUCATION

	High School	College/University	Graduate/Professional
School name			
Years completed: (<i>circle</i>)	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree			
Describe course of study:			
Describe specialized training apprenticeship, skills, and extra-curricular activities:			

Are you a veteran of the armed forces?..... Yes No

List professional, trade, business or civic activities and offices held:

(You may exclude those which indicate race, color, religion, sex or national origin.)

EMPLOYMENT EXPERIENCE

Start with your present or last job. Exclude organization names which indicate race, color, religion, sex or national origin.

Employer Telephone ()	Dates Employed		<u>Work Performed</u>
	From	To	
Address	Hourly Rate/Salary		
	Starting	Final	
Job Title			
Supervisor			
Reason for Leaving			
Employer Telephone ()	Dates Employed		<u>Work Performed</u>
	From	To	
Address	Hourly Rate/Salary		
	Starting	Final	
Job Title			
Supervisor			
Reason for Leaving			
Employer Telephone ()	Dates Employed		<u>Work Performed</u>
	From	To	
Address	Hourly Rate/Salary		
	Starting	Final	
Job Title			
Supervisor			
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Employer Telephone ()	Dates Employed		<u>Work Performed</u>
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Employer Telephone ()	Dates Employed		<u>Work Performed</u>
	From	To	
Address	Hourly Rate/Salary		
	Starting	Final	
Job Title			
Supervisor			
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

ADDITIONAL INFORMATION

If there are any periods between these employers when you were not employed, please state the dates you were not employed and the reasons for the non-employment.

Summarize special skills and qualifications acquired from employment or other experience:

List any volunteer work you have performed:

REFERENCES-Names of persons not related to you (i.e. former supervisor, colleague)

Name/Address/Phone#	Relationship <small>(i.e. former supervisor, colleague, personal)</small>

Information that you provide on this application is subject to verification. Previous employers may be contacted as references.

Acknowledgement and Agreements

1. I certify that answers given in this application are true and complete to the best of my knowledge and understand that false or misleading information or omission of information given in my application or interview(s) may result in rejection of my application or, if hired, dismissal of my employment with CAR.

Signature

Date

2. In consideration of my employment, I agree to the rules and regulations of CAR, and I agree that my employment and compensation can be terminated at any time with or without cause and with or without notice at the option of either the company or myself. I understand that no officer or representative of the company has the authority to enter into an agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing, except the President of CAR and any such agreement must be made in a signed writing directed to me personally.

I further acknowledge that no one has made any representations or statements contrary to the company's at-will policy to me, or about the company's economic outlook or stability either orally or in writing, and I acknowledge that no one has the authority to make such representations or statements to the contrary in the future.

I further acknowledge that if I accept an offer of employment with CAR, I have not relied on any oral or written representations relating to the terms and conditions of my employment or otherwise in accepting or continuing my employment with CAR.

Signature

Date

3. If employed, I understand that if I am or become handicapped in need of accommodation for employment, under Michigan law, I must notify the President in writing within 182 days after the need is known or reasonably should have been known to me.

Signature

Date

4. I authorize investigation of all statements contained in this application for any employment-related purpose. I release the listed references and all employers, except those specifically excepted*, to provide CAR with any and all applicable information they may have. I hereby release these references and former employers from all liability for any information they may give to the company.

Signature

Date

Print Name

*Employers specifically excepted:

