BOX AUTO SALVAGE

Employment Application



APPLICANT INFORMATION							
Last Name		First			M.I.	Date	
Street Address					Apartment/L	Jnit #	
City		State			ZIP		
Phone		E-mail	Address				
Date Available	Social Secu	Social Security No. D		Desi	Desired Salary		
Position Applied for							
Are you a citizen of the United States?	YES 🗌 🛚	NO 🗌	If no, are you authorized	l to wo	ork in the U.S	5.? YES 🗌	NO 🗌
Emergency Contact: Name and Number							
Have you ever been convicted of a felony?	YES 🗌 🛚		If yes, explain				

EDUCATION					
High School			Address		
From	То	Did you graduate?	YES 🗌	NO 🗌	Degree
College			Address		
From	То	Did you graduate?	YES 🗌	NO 🗌	Degree
LICT ANY DD					

LIST ANY PRIOR AUTO EXPERIENCE, SKILLS, OR KNOW-HOW'S

REFERENCES			
Please list three professional references.			
Full Name	Relationship		
Company	Phone ()		
Address			
Full Name	Relationship		
Company	Phone ()		
Address			

PREVIOUS EM	PLOYMENT					
Company			Phone ()			
Address			Supervisor			
Job Title			Starting Salary	\$	Ending Salary \$	
Responsibilities						
From	То	Reason for Leaving	I			
May we contact your previous supervisor for a reference? YES			YES 🗌	NO 🗌		
Company				Phone ()		
Address			Supervisor			
Job Title Starting Salary		\$	Ending Salary \$			
Responsibilities						
From	То	Reason for Leaving	I			
May we contact your previous supervisor for a reference? YES NO						
Company			Phone ()			
Address			Supervisor			
Job Title			Starting Salary	\$	Ending Salary \$	
Responsibilities			·			
From	То	Reason for Leaving	l			
May we contact yo	our previous super	visor for a reference?	YES 🗌	NO 🗌		

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE		
I certify that my answers are true and complete to the best of my knowledge.		
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.		
Signature Date		