

## Automotive Technologies, Inc. Employment Application Form

**PLEASE PRINT ALL REQUESTED INFORMATION EXCEPT SIGNATURE**

ATI is an equal employment opportunity employer. ATI follows a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability.

**APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS**

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last
First
Middle

Present address \_\_\_\_\_  
Number
Street
City
State
Zip Code

How long have you lived at this address? \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Previous Address if you have lived at your current address for less than one year.

\_\_\_\_\_  
Number
Street
City
State
Zip Code

Home Phone Number: (\_\_\_\_) \_\_\_\_\_ May we use this phone to contact you?  Yes  No

Cell Phone Number: (\_\_\_\_) \_\_\_\_\_ May we use this phone to contact you?  Yes  No

Work Phone Number: (\_\_\_\_) \_\_\_\_\_ May we use this phone to contact you?  Yes  No

**Days/hours available to work:**

**Position applied for and salary desired (be specific):**

Preference #1: \_\_\_\_\_ \$ \_\_\_\_\_

Preference #2: \_\_\_\_\_ \$ \_\_\_\_\_

No Preference \_\_\_\_\_ Thursday \_\_\_\_\_

Monday \_\_\_\_\_ Friday \_\_\_\_\_

Tuesday \_\_\_\_\_ Saturday \_\_\_\_\_

Wednesday \_\_\_\_\_ Sunday \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_ Can you work overtime? \_\_\_\_\_

Employment desired  FULL TIME ONLY  PART TIME ONLY  FULL OR PART TIME

When are you available to begin work?  IMMEDIATELY  ON THE FOLLOWING DATE: \_\_\_\_\_

I NEED TO GIVE \_\_\_\_\_ WEEKS' NOTICE.

**EDUCATION**

Did you graduate from High School?  Yes  No If "No," circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12  
 ...or, did you receive a High School equivalency diploma?  Yes  No

SCHOOL	NAME	ADDRESS	DATES ATTENDED		CREDIT HOURS COMPLETED	DID YOU GRADUATE (Yes / No)	TYPE OF DEGREE RECEIVED
			FROM	TO			
TECHNICAL OR BUSINESS							
COLLEGE OR UNIVERSITY							
OTHER EDUCATION							

**CRIMINAL CONVICTIONS**

**HAVE YOU EVER BEEN CONVICTED\* OF A CRIME?\***  No  Yes

**ARE CRIMINAL CHARGES CURRENTLY PENDING AGAINST YOU?**  No  Yes

If "Yes," please provide a list of **EACH** conviction, and all currently pending charges including the nature of the offense, dates of conviction, a detailed explanation about the nature of the conviction, sentence served, release dates and any other pertinent information. Attach additional sheet(s) of paper if necessary.

**\*Note:** "Conviction" for purposes of this application means a final judgment or verdict of guilty, a plea of guilty, or a plea of *nolo contendere*, in any state or federal court, regardless of whether an appeal is pending or could be taken.

**\*\*Special Note:** You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes § 46b-146, 54-76o, or 54-142a. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. § 46b-146), an adjudication as a youthful offender (C.G.S. § 54-76o), a criminal charge that has been dismissed or nolloed, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon (C.G.S. § 54-142a). If your criminal records have been erased pursuant to one of these statutes, you may swear under oath that you have never been arrested.

**DRIVER'S LICENSE**

DO YOU HAVE A DRIVER'S LICENSE?  Yes  No

What is your means of transportation to work? \_\_\_\_\_

Driver's license number \_\_\_\_\_ State of issue \_\_\_\_\_  Commercial (CDL)  Chauffeur

Expiration date \_\_\_\_\_

Have you had any accidents in the past three years?  Yes  No How many? \_\_\_\_\_

Have you had any moving violations in the past three years?  Yes  No How many? \_\_\_\_\_

**REFERENCES**

Please list two references other than relatives or previous employers.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Company: \_\_\_\_\_

Address : \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_

May we contact this reference?  Yes  No May we contact this reference?  Yes  No

**MILITARY**

HAVE YOU EVER BEEN IN THE ARMED FORCES?  Yes  No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?  Yes  No

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date\* \_\_\_\_\_

\*Honorable Discharge?  Yes  No

**WORK EXPERIENCE**

Please list your work experience for the **past ten years** beginning with your most recent job held. Include self-employment. **Attach additional sheets if necessary.**

May we contact the following employer?  Yes  No

**Name of Employer:** \_\_\_\_\_ Dates of Employment \_\_\_\_\_ Pay or salary (weekly) \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ From: \_\_\_\_\_ Start: \$ \_\_\_\_\_

Phone number: \_\_\_\_\_ To: \_\_\_\_\_ Final: \$ \_\_\_\_\_

Name of last supervisor: \_\_\_\_\_ Your last job title: \_\_\_\_\_

Reason for leaving (be specific): \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact the following employer?  Yes  No

**Name of Employer:** \_\_\_\_\_ Dates of Employment \_\_\_\_\_ Pay or salary(weekly) \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ From: \_\_\_\_\_ Start: \$ \_\_\_\_\_

Phone number: \_\_\_\_\_ To: \_\_\_\_\_ Final: \$ \_\_\_\_\_

Name of last supervisor: \_\_\_\_\_ Your last job title: \_\_\_\_\_

Reason for leaving (be specific): \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact the following employer?  Yes  No

	Dates of Employment	Pay or salary
<b>Name of Employer:</b> _____		(weekly)
Address: _____	From: _____	Start: \$ _____
City, State, Zip Code _____	To: _____	Final: \$ _____
Phone number: _____		
Name of last supervisor: _____	Your last job title: _____	
Reason for leaving (be specific): _____		

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

## PLEASE READ CAREFULLY

### EMPLOYMENT APPLICATION FORM

#### TERMS

As an inducement to Automotive Technologies, Inc. ("ATI") to consider my application for employment, I agree that:

- 1. I understand that, if hired, I will be an employee "at will."** Neither acceptance of this application, nor my subsequent employment by ATI in any position or capacity, regardless of the contents of any employee handbooks, personnel manuals, policies, benefit plans, oral statements or representations as they may exist from time to time, will: (a) create an actual or implied contract of employment, (b) confer on me any right to remain an employee of ATI, or (c) change in any respect the employment-at-will relationship between me and ATI. Such employment-at-will relationship may be altered *only* by a written agreement signed by me and a duly authorized officer of ATI.
- 2. I authorize ATI to investigate all statements contained in this application.** I understand that the misrepresentation or omission of any facts in this application constitutes cause for summary rejection of the application, or dismissal at any time without any previous notice. I hereby give ATI permission to contact all listed schools and educational institutions, and any previous employers or references, unless the contrary is indicated in this application. I hereby release ATI from any and all liability as a result of such any such contacts.
- 3. I also:** (a) understand that ATI has a **drug and alcohol policy** that provides for pre-employment testing as well as testing during employment; (b) consent to and agree to comply with such policy as a condition of my employment; and (c) acknowledge that my initial and continued employment requires me to successfully pass all tests under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.
- 4. I understand that, in connection with the routine processing of this employment application, ATI may request from a consumer reporting agency a consumer report or investigative consumer report** including information as to my credit records, character, general reputation, personal characteristics, and mode of living. In compliance with the Fair Credit Reporting Act, I will be given a Notice Regarding Background Information, and an Acknowledgment and Authorization, before such a report is ordered.
- 5. I also understand that if I am hired, I will be required to sign an Employment Agreement and will receive a copy of the ATI Employee Handbook** prior to commencement of employment.

I have completely and truthfully answered all questions on this Employment Application. I have carefully read the above terms, I understand them, and I agree to them.

Signature of applicant \_\_\_\_\_ Date: \_\_\_\_\_

PRINT YOUR NAME HERE: \_\_\_\_\_

[Thank you for completing this application form and for your interest in Automotive Technologies, Inc.](#)