	APPLICANT NAME:	DATE:	
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	(615) 794-1504
	www.moodystire.com
2	······1600 Columbia Ave. Franklin, TN 37064

APPLICATION FOR EMPLOYMENT

CUSTOMER SERVICE

We are an equal opportunity employer and do not discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services and program is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

APPLICATION INSTRUCTIONS

- 1. This application must be completed in your own handwriting
- 2. Print legibly and complete all sections on both sides of the application
- 3. Sign and date the application once it is completed

PERSONAL DATA

Last Name	First Name	Middle Name
Address		
City	State	Zip Code
Home Phone	Cell Phone	
Email Address	Social Security Nu	ımber
	-	
Type of Employment:	Salary/Wage Expe	ectations
Full Time Temporary	Part Time	

How did you find out about this position?	When would you be able to start?
Why do you feel you are qualified for this position?	
Are you currently employed?	If so, where?
Do you use tobacco? Yes No	
How long have you been at your present address?	Do you have a valid Driver's License?
	If Yes, are you insurable?
Have you ever been convicted of any crime(s), eithe infractions)? Yes No /f Yes, /	please provide thorough explanation:
Activities and Interests (exclude any organization or so national origin or ancestry of its members).	ciety name which indicates the race, religious creed, color,
List any other skills, qualifications or experience tha	t may help in this position:
List 5 words that describe you:	
1. 2. 3.	4. 5.
What is on your "Wish List" over the next few years?	

WORK EXPERIENCE

List your last 4 employers, including any military experience.

If currently employed, may we contact your current employer?						
CURRENT POSITION						
dress		City, State Z	IP.			
	Destite a trat	_	Data diament			
Name of Supervisor	Position Hei	a	Date Started	l		
Leave:			Current Rate	e of Pay		
ed anything at this job, wh	at would you ha	ve changed?				
2ND LAST POSITION						
dress		City, State Z	ZIP			
Name of Supervisor	Position Held	d	From (MM/YY)	To (MM/YY)		
			,			
			Final Rate of	Pay		
ed anything at this job, wh	at would you ha	ve changed?				
2 2	3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					
	Name of Supervisor Leave: ded anything at this job, where the supervisor Name of Supervisor	Areas Name of Supervisor Position Held Leave: ded anything at this job, what would you had dress Name of Supervisor Position Held	dress City, State Z Name of Supervisor Position Held Leave: led anything at this job, what would you have changed? dress City, State Z	Name of Supervisor Position Held Date Started		

3RD LAST POSITION						
Employer Name and Address City, State ZIP						
Telephone	Name of Supervisor	Position Held	d	From (MM/YY)	To (MM/YY)	
Main Duties:						
				ı		
Reason for Leaving:				Final Rate of	f Pay	
If you could have changed	d anything at this job, what	would you ha	ve changed?			
4 TH LAST POSITION						
Employer Name and Address City, State ZIP						
Telephone	Name of Supervisor	Position Held	t	From (MM/YY)	To (MM/YY)	
Main Duties:						
					_	
Reason for Leaving:				Final Rate of	Pay	
If you could have changed anything at this job, what would you have changed?						
n you could have changed	anything at this job, what	mound you no	ve changear			
Please explain any gaps in	n your employment history:					
What do you believe thes	e employers would say if I	called them?				
Which of your jobs did yo	ou like best? Why?					
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REFERENCES

Only list people you have known for more than a year.

Name of a Technician or Associate	Length of Time Known	Phone	Email Address
Name of a Technician or Associate	Length of Time Known	Phone	Email Address
Name of a Friend	Length of Time Known	Phone	Email Address
Name of a Friend	Length of Time Known	Phone	Email Address

EDUCATION

Na	ame of School	Location of School	Graduated?	Completed Years / Mo.	Degree Received	Major Subject
High School			Yes No			
Business or Trade School			Yes No			
College or University			Yes No			
Do you plan to continue your education?						

ASE CERTIFICATIONS

Please select all that apply and include expiration dates.

	Expires		Expires				
Engine Repair		Heating / Air Conditioning					
Automatic Transmission / Transaxle		Engine Performance					
Manual Drive Train /Axles		L1 Advanced Engine Performance					
Suspension & Steering List any other ASE Certificates here:							
☐ Brakes							
☐ Electrical / Electronics							
SKILL AND EXPERIENCE ASSESSMENT							
Which repair or estimating programs are	you profici	ent with?					
What technical courses/training or seminars have you attended in the last year?							
Below, rank the make of cars you feel you	ı have the r	nost experience in:					
1. 2.	3.	4. 5.					
Below, rank the make of cars you feel you have least or no experience in:							
1. 2.	3.	4. 5.					
On a scale of 1 to 10 how comfortable are you using a PC, Microsoft Windows and typing in general?							
RELEASE AND AUTHORIZATION STATEMENT The information given is true and correct, and I understand that if I am employed, any misrepresentation, false statement, or omission of consequence herein, found by you at the time, will be sufficient cause to terminate my employment. I authorize the verification of any or all information as listed above. As a condition of employment, if employment is offered, I must be authorized to work in the U.S. and demonstrate that authorization as required by the Immigration Reform and Control Act of 1986. I also understand that neither the application nor a commitment of employment by Monroe Tire & Service							
constitutes a contract of employment. If a contract is to exist, that document will be executed in writing by Monroe Tire & Service. I understand that this application for employment is valid for no more than 60 days. After that, I must resubmit and application in order to be considered for positions with Monroe Tire & Service.							
Applicant Signature Print	Name	Date					