



APPLICATION FOR EMPLOYMENT

Swiftly Car Wash is an equal opportunity employer. We will give consideration without regards to race, religion, sex, national origin, or any other legally protected status.

Position applying for: _____ Location: _____ Date: _____

Personal

Name: _____
(last) (first) (middle)

Address: _____
(#) (street) (city) (state) (zip)

Cell or Home Phone: (____) _____ email address: _____
(print clearly)

Social Security # : _____ Driver's License # _____
(Be prepared to show proof of SS # and ID.) (State)

When would you be available to start work? _____

What days are you available to work? (circle) **MON TUE WED THU FRI SAT SUN**

What hours are you available to work? ____ to ____ ____ to ____ ____ to ____ ____ to ____ ____ to ____

Are you legally eligible for employment in the United States? Yes No
Have you been convicted of any crimes in the past 10 years, excluding misdemeanors and summary offenses which have been annulled, expunged or sealed by a court? Yes No
If "Yes" describe in full. Use back of page if needed.

Are you a veteran of the US. Military? Yes No Were you honorably discharged? Yes No

Education

High School: _____ Diploma? Yes No
(city) (state)

College: _____ Degree? Yes No
(city) (state)

Employment (start with current or most recent job) We may contact the employers listed below unless you indicate those you do not wish us to.

Employer: _____ Phone: (____) _____

From: _____ To: _____

Address: _____ Job Title: _____

Salary / Wage: _____ Reason for leaving: _____

Contact Person: _____

Do not Contact Reason: _____

Employer: _____ Phone: _____

From: _____ To: _____

Address: _____ Job Title: _____

Salary / Wage: _____ Reason for leaving: _____

Contact Person: _____

Do not Contact Reason: _____

Employer: _____ Phone: _____

From: _____ To: _____

Address: _____ Job Title: _____

Salary / Wage: _____ Reason for leaving: _____

Contact Person: _____

Do not Contact Reason: _____

List Two Personal References:

Name: _____ Phone: _____

Name: _____ Phone: _____

List Two Emergency Contact Numbers:

Name: _____ Phone: _____ Relationship: _____
Circle Type: Mobile or Landline

Name: _____ Phone: _____ Relationship: _____
Circle Type: Mobile or Landline

Signature

Please read and understand before signing your application.

I certify that the information provided above is true and correct. Any false information or misstatement of omission may be cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the employer to engage a consumer reporting agency to investigate my credit and personal history. If a report is obtained I may request the name and address of the agency. I authorize the employer to obtain information about me from previous employers, educational institutions and other parties to verify the accuracy of the information in this applaction, a related employment resume or personal interview.

This application will expire in 30 days. Unless otherwise notified, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement.

Date: _____ Signed: _____