

APPLICANT NAME:

DATE:



3460 Lyman Dr • Gering NE 69341 • 308-641-5345

## APPLICATION FOR EMPLOYMENT AUTOMOTIVE TECHNICIAN

*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 applications 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 Number    |             |
| Type of Employment:<br><input type="checkbox"/> Full Time <input type="checkbox"/> Temporary <input type="checkbox"/> Part Time | Salary/Wage Expectations: |             |



What is on your "Wish List" over the next few years?

## WORK EXPERIENCE

*List your last 4 employers, include any military experience.*

If presently employed may we contact your present employer?    Yes                       No

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|--|--|--|--|--|

|  |                    |               |                 |                     |
|--|--------------------|---------------|-----------------|---------------------|
| <b>Current Position</b>  | Name and Address   |               | City, State Zip |                     |
| Telephone  | Name of Supervisor | Position Held |                 | Date Started        |
| Main Duties:   |                    |               |                 |                     |
| Reason for Wanting to Leave:   |                    |               |                 | Current Rate of Pay |
| If you could have changed anything at this job, what would you have changed? |                    |               |                 |                     |

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|--|--|--|--|--|

|  |                    |               |                 |                           |
|--|--------------------|---------------|-----------------|---------------------------|
| <b>2<sup>nd</sup> Last Position</b>  | Name and Address   |               | City, State Zip |                           |
| Telephone  | Name of Supervisor | Position Held |                 | From(YY/MM)    To (YY/MM) |
| Main Duties:   |                    |               |                 |                           |
| Reason for Leaving:  |                    |               |                 | Final Rate of Pay         |
| If you could have changed anything at this job, what would you have changed? |                    |               |                 |                           |

|                               |                  |                 |
|-------------------------------|------------------|-----------------|
| 3 <sup>rd</sup> Last Position | Name and Address | City, State Zip |
|-------------------------------|------------------|-----------------|

|           |                    |               |             |            |
|-----------|--------------------|---------------|-------------|------------|
| Telephone | Name of Supervisor | Position Held | From(YY/MM) | To (YY/MM) |
|           |                    |               |             |            |

Main Duties:

|                     |                   |
|---------------------|-------------------|
| Reason for Leaving: | Final Rate of Pay |
|---------------------|-------------------|

If you could have changed anything at this job, what would you have changed?



|                                     |                  |                 |
|-------------------------------------|------------------|-----------------|
| <b>4<sup>th</sup> Last Position</b> | Name and Address | City, State Zip |
|-------------------------------------|------------------|-----------------|

|           |                    |               |             |            |
|-----------|--------------------|---------------|-------------|------------|
| Telephone | Name of Supervisor | Position Held | From(YY/MM) | To (YY/MM) |
|           |                    |               |             |            |

Main Duties:

|                     |                   |
|---------------------|-------------------|
| Reason for Leaving: | Final Rate of Pay |
|---------------------|-------------------|

If you could have changed anything at this job, what would you have changed?

Please explain any gaps in your employment history:

What do you believe these employers would say if I called them?

Which of your jobs did you like best? And why?

## REFERENCES

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

|                                    |                      |       |               |
|------------------------------------|----------------------|-------|---------------|
| Name of a Service Advisor/Employer | Length of Time Known | Phone | Email Address |
| Name of a Technician               | Length of Time Known | Phone | Email Address |
| Name of a Technician               | Length of Time Known | Phone | Email Address |
| Name of a Technician               | 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 |
| Name of a Friend                   | Length of Time Known | Phone | Email Address |

## EDUCATION

| Name 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? Yes  No  If Yes, When? \_\_\_\_\_





Below, rate your experience on the following systems:

|                                 | Master Tech              | Journey Level            | Apprentice Level         | Little or None           |
|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Engine Performance/Tune         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Electrical & Computer Diagnosis | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Emission Testing and Diagnosis  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Heating & Air Conditioning      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Engine Repair                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Brake, Suspension and Steering  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Automatic Transmissions         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Manual Transmissions            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Routine Maintenance & Servicing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Do you have any physical problems that will restrict your abilities to service and repairs cars, such as lifting heavy objects like wheels, cylinder heads, etc. or bending over long periods of time while working under the hoods of cars, color blindness, eye issues, hearing issues? Yes  No  If Yes, please explain:

If you were to create a maintenance schedule for an average 10 year old car, what mileage/month intervals would you recommend the services be for:

|               |  |                    |  |
|---------------|--|--------------------|--|
| Oil Changes   |  | Coolant            |  |
| ATF Service   |  | "Lifetime" Coolant |  |
| Shocks/Struts |  | Hoses              |  |
| Brake Fluid   |  | Belts              |  |

## 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 Panhandle Diesel Service LLC constitutes a contract of employment. If a contract is to exist, that document will be executed in writing by Panhandle Diesel Service LLC. 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 Panhandle Diesel Service LLC.

Applicant Signature

Print Name

Date