



30 Bitmore Drive \* PO Box 919 \* Whiteville, NC 28472 \* 910-642-4123 \* Fax: 910-642-5362

**APPLICATION FOR EMPLOYMENT – AN EQUAL OPPORTUNITY EMPLOYER**

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT but merely is intended to evaluate suitability for employment. It is the policy of Black's Tire Service, Inc. to provide equal employment to all persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, or any other status protected under state and federal law. It is also the policy of Black's Tire Service, Inc. to have the option of conducting pre-employment screening before a job offer is made. If a job offer is made, employment may be contingent upon a successful completion of an examination, which may include providing body substance samples.

**APPLICANT DATA:**

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

Nick Name: \_\_\_\_\_ Social Security #: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_-\_\_\_\_

Address: \_\_\_\_\_, City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you have a valid driver's license? If so, state: \_\_\_\_\_ License No.: \_\_\_\_\_ Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you received any vehicle citations or violations within the last five years: \_\_\_\_\_. A YES answer to this question is not an automatic bar to employment. Each case is considered individually for positions requiring a valid Driver's License.

Have you ever worked for this company? If yes, when \_\_\_\_\_ Location: \_\_\_\_\_

Have you any relatives working for Black's Tire Service? If yes, give name and relation: \_\_\_\_\_

Are you a citizen of the United State? \_\_\_ yes \_\_\_ no. If not, are you legally allowed to work in the United States? \_\_\_\_\_

Have you ever pled "guilty", "no contest", or been convicted of a crime? \_\_\_ yes \_\_\_ no  
If yes, give dates and details: \_\_\_\_\_

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.

Position Applied For: \_\_\_\_\_ Date you can start work: \_\_\_\_/\_\_\_\_/\_\_\_\_ Desired Salary: \_\_\_\_\_

Desired work location: \_\_\_\_\_ Are you willing to relocate if needed: \_\_\_\_\_

Do you have any physical limitations that would restrict your ability to perform the duties this job requires? \_\_\_\_\_. If yes, please explain \_\_\_\_\_

Have you ever had a back injury or related problems? \_\_\_\_\_. If yes, please explain \_\_\_\_\_

**EDUCATION:**

A. Check highest grade completed: \_\_\_\_ 1, \_\_\_\_ 2, \_\_\_\_ 3, \_\_\_\_ 4, \_\_\_\_ 5, \_\_\_\_ 6, \_\_\_\_ 7, \_\_\_\_ 8, \_\_\_\_ 9, \_\_\_\_ 10, \_\_\_\_ 11, \_\_\_\_ 12

B. If you did not complete high school, do you have a high school equivalency diploma? \_\_\_ Yes \_\_\_ No

C. Indicate number of years of post high school education: \_\_\_\_\_. Please give name of school and area of study: \_\_\_\_\_

Explain your skills, abilities and knowledge which best demonstrate your qualifications for this position: \_\_\_\_\_

**PREVIOUS EMPLOYMENT (begin with most recent position):**

Date of Employment: From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_ Position Held: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Phone No.: (\_\_\_\_) \_\_\_\_\_

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

Supervisor: \_\_\_\_\_ Your salary and Title: \_\_\_\_\_

Your duties and responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? \_\_\_ Yes \_\_\_ No

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Date of Employment: From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_ Position Held: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Phone No.: (\_\_\_\_) \_\_\_\_\_

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

Supervisor: \_\_\_\_\_ Your salary and Title: \_\_\_\_\_

Your duties and responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? \_\_\_ Yes \_\_\_ No

\*\*\*\*\*  
Date of Employment: From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_ Position Held: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Phone No.: (\_\_\_\_) \_\_\_\_\_

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

Supervisor: \_\_\_\_\_ Your salary and Title: \_\_\_\_\_

Your duties and responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? \_\_\_\_ Yes \_\_\_\_ No

**REFERENCES:**

Please furnish the names, addresses and telephone numbers of three people to whom you are not related and by whom you have not been employed:

Name: \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

**APPLICANT'S CERTIFICATION AGREEMENT**

1. I authorize the investigation of all statements contained in this application and release from all liabilities any persons or employees supplying such information, and I also release the company from all liability which might result from making the investigation.

2. I hereby certify that all statements made in this application and any additional supporting documents are true and I authorize investigation of all matters contained in the application material. I agree and understand any misstatement or omission of material facts on this application will cause forfeiture on my part of all rights of employment with Black's Tire Service, Inc.

3. I understand that any employment offer is contingent upon my providing valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986, and if required by the position for which I am applying, I further agree to be fingerprinted/back grounded and to submit to a drug test by a physician.

4. I understand that all offers of employment are conditioned upon satisfactory proof of identity and legal ability to work in the United States and that Black's Tire Service, Inc. is legally required by the Federal Government to hire only U. S. citizens and aliens lawfully authorized to work in the United States.

5. I understand that it is the policy of Black's Tire Service, Inc. to preserve the right to equal employment opportunity for all persons. Candidates that may require special assistance in any phase of the application or testing process should advise the personnel department upon submittal of application.

6. I agree, if I am offered and accept a position, to conform to all existing and future Company rules and regulations. I understand that the Company reserves the right to change wages, hours and working conditions as deemed necessary. **I ALSO UNDERSTAND THAT, IF HIRED, MY EMPLOYMENT WILL BE AT-WILL, MEANING THAT EITHER PARTY CAN END THE EMPLOYMENT RELATIONSHIP AT ANY TIME FOR ANY OR NO REASON.**

7. I have read and reviewed the information provided in this application and the above statements. By signing this application, I certify that I understand all parts of it and have answered all questions completely and fully.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE