



EMPLOYMENT APPLICATION

We consider applicants for all positions without regard to race/color, religion, disability, gender, sexual orientation, national origin, age, marital or veteran status, or any other legally protected class.

Answer all questions – incomplete applications are rejected

| | | | |
|------------------|-------------------|------------------------|-------------------|
| | | | Date |
| Last Name | First | Middle | Social Security # |
| Street Address | | | Home Phone # |
| City, State, Zip | | | Cell Phone # |
| Position Desired | \$ _____ per hour | Date Available to Work | |
| | | Salary Desired | |

Indicate your weekly availability: Are you available to work: F/T P/T Temp

Mon Tues Wed Thurs Fri Sat Sun

From _____ Desired number of hours per week:

To _____ 10-20 20-30 30-40 40-50 50-60 60+

Will you work overtime, evenings, Saturdays and Sundays? Yes No

Are you currently on “lay-off” status and subject to recall? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

Yes No *(proof of citizenship or immigration status will be required upon employment)*

EDUCATION

| School | Name & Location | Course of Study | # Years Completed | Did you Graduate? | Degree / Diploma |
|---------|-----------------|-----------------|-------------------|-------------------|------------------|
| High | | | | | |
| College | | | | | |
| Other | | | | | |

MILITARY

Complete this section if you served in the U.S. Armed Forces

| | |
|--|--|
| Describe your duties & any special training: | Branch of Service: |
| | Period of Active Duty: From _____ To _____ |
| | Rank at Discharge: Date of Final Discharge: _____ |

Are you over the age of 18? Yes No *If no, an employment certificate issued by school authorities will be required.*

How long have you resided at the present address: _____

If less than 3 years list previous address: _____

How long at previous address? _____



EMPLOYMENT HISTORY

Please give accurate, complete full-time and part-time employment record. Start with most recent employer
We may contact the employers listed below unless you indicate those you do not want us to contact.

| | |
|---------------------|---|
| Company Name: | Telephone: |
| Address: | Employed (month & yr.): From To |
| Name of Supervisor: | Weekly Pay: Start Last |
| Job Title & Duties: | May we contact them? |
| Reason for Leaving: | |

| | |
|---------------------|---|
| Company Name: | Telephone: |
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Have you been convicted of a crime? Yes No

Are there any felony charges pending against you? Yes No

If yes to either of the questions above, describe in full: _____



DRIVING HISTORY

Driver's License #: _____ State: _____ Expiration Date: _____

A copy of your valid driver's license is required with this application.

Employment may involve driving a company vehicle. Have you had any accidents or traffic violations in the past three years: Yes No

Has your license been under suspension in the past three years? Yes No

If either of the above is yes, list below:

| Date | Violation or Accident? | Type of Incident | License Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, date reinstated |
|------|------------------------|------------------|--|-------------------------|
| | | | License Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | License Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | License Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | License Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

OTHER QUALIFICATIONS

Summarize special job-related skills & qualifications acquired from employment or other experiences that you believe will be a positive contribution our business and/or work performance.

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I understand that a physical is required, at the employer's expense, and realize that a drug test will be performed. Should I request a re-test I understand it will solely be at my expense. I also understand that dependent upon the examination results, I may be rejected for employment or may be dismissed if employed prior to receipt of the examination results. If you decide to engage an investigative consumer reporting agency to report on my credit and personal history, I authorize you to do so. If a report is obtained you must provide, at my request, the name and address of the agency so I may obtain from them the nature and substance of the information contained in the report. I understand an acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. The information provided in this Employment Application is true, correct and complete. If employed, any false, misstatements or omissions of fact on this application may result in my dismissal.

Signature

Date



STANDARD PERSONNEL SCREENING QUESTIONNAIRE

Name (please print): _____

Address: _____

Years at this Address: _____

City: _____

State: _____

Zip: _____

Social Security Number: _____

Home Phone #: _____

Maiden Name / Alias: _____

Date of Birth: _____

Driver's License #: _____

State: _____

Previous Addresses over past 5 years: _____

Name of College: _____ State: _____ Year Graduated: _____

AUTHORIZATION AND GENERAL RELEASE

I hereby authorize Rental World and their agents TGB Associates to request and receive any information and records concerning me, including but not limited to consumer credit, criminal history, workers' compensation, driving, employment, military, civil and educational data and reports, from any individuals, corporations, partnerships, associations, institutions, school, governmental agencies and departments, courts, law enforcement and licensing agencies, consumer reporting agencies and other entities, including my past and present employers.

I further release and discharge Rental World and all of its subsidiaries and affiliates and every employee or agent including those of TGB Associates, and all individuals and personal, business, private or public entities of any kind, from any and all claims and liability arising out of any compliance, or attempted compliance with such request(s). I understand that Rental World has the right to rescind any offer of employment that many have been made, as well as the right to terminate employment, that may have been made, based on the information received.

I acknowledge that I have voluntarily provided, for employment purposes, the above information, authorization and general release.

Signature _____

Date _____