EMAIL TO:

Conley, GA Employment

Dale Adams – Branch Manager <u>dadams@partssouth.com</u> or Jason McCard – General Manager <u>jmccard@partssouth.com</u>

Charlotte, NC Employment

Crystal Roseberry – Branch Manager croseberry@partssouth.com

or Jason McCard – General Manager jmccard@partssouth.com

Dublin, GA Employment

Lee Johnson – Branch Manager <u>ljohnson@partssouth.com</u> or Jason McCard – General Manager jmccard@partssouth.com

or

FAX TO: 470-480-7955

Parts South Inc. Application for Employment

We are an equal opportunity employer and do not unlawfully 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.

Applicant name (first, middle, last):		Date:			
Position(s) applied for:Social Security					
Address:	City:	State:	Zip:	How Long:	
(Note: Last 3 years history require	ed of driver applicants. Pleas	e use back of this	s page if need	led to meet this requiremer	1t.)
Telephone # : ()	Date you will b	e available to st	art work:		
Are you over the age of 18?	Position desired:		Desired Sa	alary:	
Have you worked for this comp	oany before? Are you a	ble to meet the	attendance	requirements?	
Are you legally eligible for em	ployment in this country?_	Have you	ever been c	onvicted of a crime?	
If yes, please provide dates and	details (a conviction will	not automatical	lly bar emp	loyment):	
Date of birth (driver applicants	only, CFR 391.21):	How wer	e you referr	red to us?	
Type of employment desired: _	full time pa	art-time	temporary		
Employment History					

Provide all employment information for the past ten years starting with the most recent employer. Continue on the back of the application if there is insufficient space available.

Employer:	Position :
Address:	Telephone #:
Dates employed: fromto	
Immediate supervisor and title:	May we contact for reference?
Job summary:	Reason for leaving:

	Position :				
Address:	dress: Telephone #:				
Dates employed: from	to				
Immediate supervisor and title:	May we contact for reference?				
Job summary:	Reason for leaving:				
Employer:	Position :				
Address:	Telephone #:				
Dates employed: from	to				
Immediate supervisor and title:	May we contact for reference?				
Job summary:	Reason for leaving:				
qualifications:	ers), job-related training, skills, licenses, certificates, and/or oth				
List school name and location, years con	npleted, course of study, and any degrees earned:				
List school name and location, years con High School:	npleted, course of study, and any degrees earned:				
List school name and location, years con High School: College:	npleted, course of study, and any degrees earned:				
List school name and location, years con High School: College: Technical Training:	npleted, course of study, and any degrees earned:				
High School: College: Technical Training:	npleted, course of study, and any degrees earned:				
List school name and location, years con High School: College: Technical Training: Other: Driving History (driver applicants)	npleted, course of study, and any degrees earned:				
List school name and location, years con High School: College: Technical Training: Other: Driving History (driver applicants Driver's license number:	npleted, course of study, and any degrees earned:				

Have you had any speeding, moving violations or other traffic convictions in the past three years?_____

References

List three references names, telephone numbers, and years known (do not include relatives or employers):

General Information		
Are you on layoff and subject to recall?	What company?	
Have you served in the military?	When ?	What branch?
What skills did you learn?		
Have you ever been counseled with, disciplined, or di	scharged for one of the fo	bllowing reasons:
() violation of safety rules?() bringing weapons on company property?		or threatening a fellow employee? , or other treatment?
Explain any boxes checked:		

Applicant Statement: I certify this application was completed by me, and all entries are true and complete to the best of my knowledge.

I hereby authorize the potential employer to contact, obtain and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives from seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information. I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am offered employment, I understand that such an offer will be conditioned upon satisfactory results of a background investigation and / or Company medical examination or inquiry.

If am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either the employer or I can terminate the relationship at will, with or without cause, at anytime, so long as there is no violation of applicable federal or state law.

I understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time can result in immediate termination of employment.

I have read, fully understand and accept all terms of the Applicant Statement.

	Signature	of A	Applican	t
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_Date:_____