

PRE-EMPLOYMENT APPLICATION

Our company is an equal opportunity employer and considers all applicants equally without regard to race, sex, age, color, religion, national origin, veteran status, or disability as provided in The Americans with Disability Act. This application will be given every consideration, but it's receipt does not imply the applicant will be employed. Each question must be answered completely and accurately before any action on it can be taken.

PERSONAL INFORMATION

NAME LAST <u>Pena</u>	FIRST <u>Juan</u>	MIDDLE <u>Antonio</u>	SOCIAL SECURITY NUMBER <u>640-68-0001</u>	CURRENT DRIVER'S LICENSE # <u>47317887</u>	TYPE OF LICENSE <u>Drivers License</u>	STATE <u>Tx</u>
PRESENT ADDRESS STREET <u>4205 Barrera Dr</u>			APT. NO. <u></u>	CITY <u>Corpus Christi</u>	STATE <u>Tx</u>	ZIP CODE <u>78416</u>
PERMANENT ADDRESS STREET <u></u>						
ARE YOU 18 YEARS OR OLDER? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO						
PHONE NO. <u>361-480-8281</u>						
IN CASE OF EMERGENCY NOTIFY <u>Irene Villanueva</u> , <u>4205 Barrera Dr</u> , <u>Corpus Christi Tx</u> , <u>78416</u> <u>361-904-2678</u>						
NAME STREET CITY STATE ZIP CODE PHONE NO.						

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OF IMMIGRATION STATUS?

☐ YES ☒ NO

EMPLOYEMENT DESIRED

POSITION <u>Prepper / Body Shop</u>	FULL TIME <input checked="" type="checkbox"/> PART TIME <input type="checkbox"/> SUMMER OR TEMPORARY <input type="checkbox"/>	DATE YOU CAN START <u>As soon as possible</u>	SALARY DESIRED <u>16.00</u>
ARE YOU EMPLOYED NOW? <u>NO</u>			
IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER			
EVER APPLIED TO THIS COMPANY BEFORE? <u>NO</u>	WHERE? <u>N/A</u>	WHEN? <u>N/A</u>	
EVER WORKED FOR THIS COMPANY BEFORE? <u>NO</u>	WHERE? <u>N/A</u>	WHEN? <u>N/A</u>	
REASON FOR LEAVING <u>N/A</u>			

NAME OF LAST SUPERVISOR AT THIS COMPANY? N/A

WHO REFERRED YOU
TO THIS COMPANY?

☐ EMPLOYMENT AGENCY ☐ NEWSPAPER ADVERTISEMENT ☐ OTHER
☐ STATE EMPLOYMENT OFFICE ☐ COLLEGE PLACEMENT SERVICE ☐ WALKED IN ☒ FRIEND

EDUCATION

SCHOOL LEVEL	NAME & ADDRESS OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	AWARDS RECEIVED	SUBJECTS STUDIED
GRAMMER LEVEL					
<u>HIGH SCHOOL</u>	<u>W.B Ray high school</u>	<u>4</u>	<u>Yes</u>	<u>N/A</u>	<u>N/A</u>
COLLEGE					
TRADE BUSINESS OR CORRESPONDENCE SCHOOL					

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK:	
IF YOU DID NOT GRADUATE HIGH SCHOOL OR COLLEGE EXPLAIN:	
SPECIAL SKILLS:	
CAN YOU TYPE: <input type="checkbox"/> YES <input type="checkbox"/> NO; IF YES _____ W.P.M.	
DESCRIBE COMPUTER SKILLS & EXPERIENCE:	
ARE YOU WILL TO RELOCATE?	

FORMER EMPLOYER (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)

NAME AND ADDRESS OF PRESENT OR LAST EMPLOYER Corpus Christi State School 902 Airport Rd
STARTING DATE Feb. 2020 LEAVING DATE Feb. 2024
MONTH YEAR MONTH YEAR
WEEKLY STARTING SALARY 17.00
JOB TITLE Direct Support Professional 3
NAME AND TITLE OF SUPERVISOR Fletcher Coleman Direct Support Professional 3
DESCRIPTION OF WORK Co-regiving REASON FOR LEAVING looking for new career
WERE YOU EVER DISCIPLINED OR WARNED FOR ABSENTEEISM OR TARDINESS ☐ YES ☒ NO; IF YES EXPLAIN

NAME AND ADDRESS OF PRESENT OR LAST EMPLOYER
STARTING DATE LEAVING DATE
MONTH YEAR MONTH YEAR
WEEKLY STARTING SALARY
JOB TITLE
NAME AND TITLE OF SUPERVISOR
DESCRIPTION OF WORK REASON FOR LEAVING
WERE YOU EVER DISCIPLINED OR WARNED FOR ABSENTEEISM OR TARDINESS ☐ YES ☐ NO; IF YES EXPLAIN

NAME AND ADDRESS OF PRESENT OR LAST EMPLOYER
STARTING DATE LEAVING DATE
MONTH YEAR MONTH YEAR
WEEKLY STARTING SALARY
JOB TITLE
NAME AND TITLE OF SUPERVISOR
DESCRIPTION OF WORK REASON FOR LEAVING
WERE YOU EVER DISCIPLINED OR WARNED FOR ABSENTEEISM OR TARDINESS ☐ YES ☐ NO; IF YES EXPLAIN

Would you be willing and able to perform all of the essential job functions on the **ATTACHED LIST** required by the job you are applying for?

☒ YES ☐ NO

If not, explain which tasks _____

Have you filed any type of fraudulent claim against any of your present or past employers?

☐ YES ☒ NO

If yes, explain _____

Will you abide by the safety rules of this company?

☒ YES ☐ NO

Have you ever been disciplined for violating company safety rules or regulations?

☐ YES ☒ NO

If yes, explain _____

How many days of work (or school) have you missed in the last two years?

3 days (Family Death)

How many times have you been late for work (or school) in the last two years?

N/A

REFERENCE GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU AND WHO ARE NOT PRIOR EMPLOYERS WHOM YOU HAVE KNOWN 1 YEAR

NAME	HOME ADDRESS	HOME PHONE #	BUSINESS ADDRESS	BUSINESS PHONE	YEARS ACQUAINTED
Jasmine Truogas	1320 Cambridge Dr	361-528-2885			11
Brianna Salinas	6947 Everhart Rd	361-585-9571			3
Richard Lee	1332 17th St	346-630-7132			5

SERVICE RECORD

BRANCH OF SERVICE	DISCHARGE DATE RANK
PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES	DATE OBLIGATION ENDS

SPECIAL QUESTIONS

DO NOT ANSWER ANY OF THE QUESTIONS IN THIS FRAMED AREA UNLESS THE EMPLOYER HAS CHECKED A BOX PROCEEDING A QUESTION.

A CHECKED BOX INDICATES THE INFORMATION IS REQUIRED FOR A BONA FIDE OCCUPATIONAL QUALIFICATION OR DICTATED BY NATIONAL SECURITY LAWS OR IS NEEDED FOR OTHER LEGALLY PERMISSIBLE REASON.

- ☒ HEIGHT FEET 5 INCHES 8
- ☒ ARE YOU A U.S. CITIZEN? YES / NO
- ☒ ARE YOU ABLE TO PERFORM EACH OF THE ESSENTIAL JOB FUNCTIONS ON THE ATTACHED LIST WITH OR WITHOUT AN ACCOMMODATION? YES / NO
- ☒ **PLEASE SEE THE ATTACHED LIST OF ESSENTIAL JOB FUNCTIONS**

FOR EACH FUNCTION YOU CAN ONLY PERFORM WITH REASONABLE ACCOMMODATION, EXPLAIN HOW YOU WOULD PERFORM EACH FUNCTION THE TASKS, AND WITH WHAT ACCOMMODATION?

- N/A
- N/A
- N/A

- ☒ WHAT FOREIGN LANGUAGES TO YOU SPEAK FLUENTLY? N/A READ FLUENTLY? N/A WRITE FLUENTLY? N/A

- ☒ HAVE YOU BEEN CONVICTED OF ANY CRIME (EXCLUDING MINOR TRAFFIC), INCLUDING DWI OR DUL (ANSWERING "YES" WILL NOT BE AN AUTOMATIC BAR TO EMPLOYMENT) YES NO /

IF "YES" STATE: LOCATION OFFENSE DATE: DISPOSITION:

ADDITIONAL EXPLANATION:

NOTICE TO APPLICANT INITIAL EACH BOX TO ACKNOWLEDGE RECEIPT OF NOTICE

☒ I understand and agree that I may be required to take one or more physical examinations: lie detector test(s) as a condition of hiring or continued employment. I agree to consent to take such test(s) as such time as designated by the Company and to release the Company's directors, officers, agents or employees from any claim arising in connection with the use of such test(s)

☒ I have been advised and I understand that the taking of drug and alcohol tests given according to Company policy are conditions of the condition of any employment offered to me. I acknowledge that refusal to take the same when asked will be grounds for immediate termination.

☒ I have been advised that if I am offered a job I may be required to take drug and medical tests and I agree to do so if requested.

☒ I have been advised that lie detector tests, as a condition of hiring or continued employment, are prohibited by law, but may be used in situations where employers have evidence that an employee is involved in theft, fraud or other crime if all requirements of the Polygraph Protection Act of 1988 are met.

Essential Physical Job Functions

All Administrative Employees Must Be Able To:

- remain in a stationary, seated position for at least 2 continuous hours per day
- communicate and exchange accurate information
- operate a computer
- ascend and descend stairs
- frequently reach, bend, push and pull
- frequently lift up to 5 lbs and infrequently lift between 10-25 lbs
- stand and walk for up to 2 hours per day

II Parts Employees Must Be Able To:

- stand and walk for up to 4 continuous hours per day
- remain in a stationary, seated position for up to 4 continuous hours per day
- traverse the department and/or dealership for up to 6 continuous hours per day
- lift up to 50 lbs
- frequently reach, bend, push and pull
- ascend and descend stairs and move items up to 25 lbs
- ascend and descend a ladder and move up to 10 lbs
- move items up to 50 lbs
- communicate and exchange accurate information
- inspect and recognize
- operate a computer

All Service & Body Shop Employees Must Be Able To:

- remain in a stationary, seated position for up to 2 hours per day
- stand and walk for up to 4 hours per day
- frequently lift 5-20 lbs and occasionally lift 25-50 lbs
- occasionally drive vehicles with manual transmissions
- frequently reach, bend, push and pull
- perform multiple tasks of fine manipulation
- inspect and recognize
- operate a computer
- communicate and exchange accurate information
- ascend and descend stairs and move items up to 25 lbs ascend and descend a ladder and move up to 10 lbs

All Sales Employees Must Be Able To:

- remain in a stationary, seated position for at least 2 continuous hours per day
- stand and walk for up to 4 hours per day
- communicate and exchange accurate information
- operate a computer
- frequently reach, bend, push and pull
- operate a vehicle with a manual transmission
- frequently climb in and out of heavy-duty trucks

All Information Technology Employees Must Be Able To:

- remain in a stationary, standing position for at least 2 continuous hours per day
- communicate and exchange accurate information
- operate a computer
- ascend and descend stairs
- frequently reach, bend, push and pull
- frequently lift up to 5 lbs and infrequently lift between 10-25 lbs
- stand and walk for up to 2 hours per day

AUTHORIZATIONS

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE. I UNDERSTAND THAT IF ANY FALSE OR MISLEADING INFORMATION, OMISSION, OR MISREPRESENTATION IS DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANYTIME. BY SIGNING BELOW, I AUTHORIZE THE COMPANY TO SEEK FROM MY PRIOR EMPLOYERS AND MY PRIOR EMPLOYERS TO RELEASE INFORMATION ABOUT MY PRIOR EMPLOYMENT.

IF EMPLOYMENT IS OFFERED TO ME, I AGREE TO CONFORM TO AND FOLLOW ALL THE COMPANY'S RULES AND REGULATIONS. I ALSO AGREE ANY EMPLOYMENT OFFERED TO ME WILL BE "AT WILL AND MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, BY EITHER ME OR THE COMPANY. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN ITS PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO ANY OF THE FOREGOING.

DATE

SIGNATURE

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