Roper’s Wrecker Service Employment Application

PO Box 576

Mckinney, TX 75070

Office: 972-562-5333 Date / /

*An equal opportunity employer.*

**PERSONAL**

Name

 *(Last) (First) (Middle)*

Address

 *(Street) (City) (State) (Zip Code)*

Telephone Social Security Number

Driver’s License Number State Expiration Date

Have you ever been convicted of a felony

In the last seven years? Yes No Explain Felony

Are you a citizen of the United States? Yes No

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Type of School | Name and Location | Course of Study | # of Years | GradeAverage | MaximumGrade | Degree, Diploma,Certificate and HonorsReceived |
| HighSchool |  |  |  |  |  |  |
| College orUniversity |  |  |  |  |  |  |
| OtherEducation |  |  |  |  |  |  |
| OtherEducation |  |  |  |  |  |  |

**JOB INTERESTS/SKILLS**

Position(s) applied for Salary Desired

Have you applied for this position before? Yes No If yes, When?

Type of employment requested Full Time Part Time Temporary Summer

Date you can begin working Typing Speed (WPM)

Summarize any other special skills or qualifications

**EDUCATION**

**ACKNOWLEDGEMENT**

I certify the answers given by me in this application are correct to the best of my knowledge. I understand that any falsification of this application, whether willingly or accidental, is grounds for disqualification of employment consideration, or dismissal from employment if I am hired. I authorize the company to contact any and all of the references I have listed above to obtain previous employment information or any other pertinent information that they may have. Further, I release the above mentioned references from any and all liability for any damages that may result from information collected by this company. Verification of eligibility to work in the United States must be satisfied for an offer to be made.

Applicant’s Signature Date

**REFERENCES**

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Relationship | Home Phone | Daytime Phone |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Name of Employer Phone

Address

 *(Street) (City) (State) ( Zip Code)*

Supervisor and Title Your Title

Employed From To Starting Salary Ending Salary

Work Performed

Reason for Leaving

1. Name of Employer Phone

Address

 *(Street) (City) (State) ( Zip Code)*

Supervisor and Title Your Title

Employed From To Starting Salary Ending Salary

Work Performed

Reason for Leaving

 **EMPLOYMENT HISTORY (LIST MOST RECENT FIRST)**

1. Name of Employer Phone

Address

 *(Street) (City) (State) ( Zip Code)*

Supervisor and Title Your Title

Employed From To Starting Salary Ending Salary

Work Performed

Reason for Leaving