APPLICATION FOR EMPLOYMENT all opportunity employer, dedicated to a policy of non-discrimination in employment on the bases of any category or

	nity employer, dedicated to a y applicable federal, state a		iscriminatio	n in employmen	t on the bases	of any category or	
PERSONAL INI				Date			
							Last
Name	Last	First		Middle			_ #
Present Address	Lasi	FIISt		Middle			
Flesent Address	Street		С	ity	State	Zip	-
E-Mail Address	·						_
Phone No.							
Referred By		Are you 18 years of age or older? ☐ Yes ☐ No					
							First
EMPLOYMENT	DESIRED						st
Position			Date You Can Start		Sala Des	ary sired	
Are You Employed Now?			If So, May We Inquire of Your Present Employer? ☐ Yes ☐ No				
Ever Applied to this Company Before?		Where?	Vhere? When?			Middle	
Do you have a valid Illinois	s Driver's license? 🔲 Yes	□ No					
EDUCATION	Name and Loc	eation of School		Circle Last Year Completed	Did You Graduate?	Subjects Studied Degree(s) Recei	
Grammar School					☐ Yes ☐ No		
High School				1 2 3 4	☐ Yes ☐ No		
College, Trade, Business or Correspondence School				1 2 3 4	☐ Yes ☐ No		

(Continued on Other Side)

Date Month and Year	Name and Address of Employer	Salary (upon leaving)	first. Position	Supervisor's Name	
From					
То					
rom					
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rom					
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From					
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	st below three persons not related to you, w	nom you have known at least	one year.		
Name	Address		Position	Years Acquainte	
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3					
EMERGENCY CO	NTACT (MUST BE PROVIDED)		The second secon		
ıme		Phone			
dress					

If you are to be hired by the company, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand that any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character, and general reputation to the Company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclosure to the Company the results of the examination, which results shall remain confidential and segregated from my personal file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that filling out this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company work rules, policies and procedures. The company retains the right to revise its policies or procedures, in whole or in part, at any time.

The undersigned does hereby authorize the release and delivery of all motor vehicle driving records relating to the undersigned, including but not limited to personal information, to Patrick Dealer Group and its insurance agents, and companies.

Date	Signature