# Action Towing Application for Employment

Last name	First	Middle Initial	Are you at least 18 years old?	Date of application	
Street address			Specific job desired	Social Security number	
City	State	ZIP	Home telephone	Work telephone	
How were you referred to our Company?		What s	What shifts are you available?		

# Please read carefully and complete by printing in ink or typing.

#### An Equal Opportunity Employer

We are an equal opportunity employer. We do not discriminate on the basis of race, color, religion, national origin, sex, age, marital status, or existence of any physical or mental disability that does not interfere with the performance of the position for which you are applying. Information provided on this application will not be used for any discriminatory purpose.

### Provide all information requested.

This employment application will be kept in an active application file for forty-five (45) days unless it is screened out. Your application will be considered only for the job(s) for which you have applied. To keep your application active, you must return to this office after thirty (30) days but prior to forty-five (45) days and request your application be renewed. At that time you will be requested to date and sign a renewal form and make any appropriate updates to your application. This application renewal process must be repeated every forty-five days to keep your application under consideration for employment with our Company.

## Employment Record

Starting with present or most recent, list all previous employers. Include self-employment, summer, and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Last or present company		Type of business	Type or classification of job		
Street address		Phone number	Brief description of job duties		
City	State	ZIP code			
Supervisor's name		Phone number			
Wage rate	Dates worked From	То			
Reason for leaving					
Last or present com	pany	Type of business	Type or classification of job		
Street address		Phone number	Brief description of job duties		
City	ity State		-		
Supervisor's name		Phone number			
Wage rate	Dates worked From	To			

Last or present company		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State .	ZIP code	
Supervisor's name		Phone number	
Wage rate	Dates worked From	To	
Reason for leaving			
ast or present company		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Wage rate	Dates worked From	To	
Reason for leaving			
Last or present company		Type of business	Type or classification of job
Street address	7	Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Wage rate	Dates worked From	То	
Reason for leaving			
Last or present company	11273-127-1	Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Wage rate	Dates worked From	To	
Reason for leaving			.,
Last or present company		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Wage rate	Dates worked From	То	
Reason for leaving			

School	ol name	Location	Major course			Degree
		(city, state)	or subject	Yes	No	
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Kinds of training and duty wi	nile in service		-	
- P-7-27-1888		SECTION AND A SECTION ASSESSMENT	aparti i Tem	
Professional/Work Refere	nces	d to you who have knowledge of your qu		
Name	Title/relationship	Address (street, city, state, ZIP code)	Phone no. (include area code)	Occupation
Wage or salary required	No			
	7			
Date available				
- 105 May	THE STREET WAS S	9639 26 SAL	WERE FOR	
	at at Action Towing you wil	Il need to provide evidence of United	States citizenship, o	e authorization to work
To qualify for employment in the United States, as re-	quired by the Immigration l	Reform and Control Act of 1986.	California California (California California	addivingation to won
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