

AIRPORT PARKING

AIRPORT PARKING is an equal opportunity employer. We assess all applicants for all positions without unlawful consideration of race, religion, age, color, sex, national origin, handicap, veteran status, sexual orientation, or any other basis prohibited by applicable law.

APPLICATION FOR EMPLOYMENT

Instructions: Please complete the entire application, sign and return to AIRPORT PARKING. If additional space is required, please use page 4.				
Last Name		First Name		Date
Current Address, City, State, Zip Code			Home Phone	
			Other Phone	
Position For Which You Are Applying			Date Available for employment	
Do You Have Any Relatives Employed By AIRPORT PARKING?			What prompted you to apply at AIRPORT PARKING	
If Yes State Name and Relationship			<input type="checkbox"/> Knowledge of Company <input type="checkbox"/> Friend(name) _____ <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative(name) _____ <input type="checkbox"/> Newspaper <input type="checkbox"/> Other _____	
			<input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you ever applied to our company before?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you ever worked for our company before?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
If your answer to either of the above questions is Yes, state when and where you applied and/or worked.				
Are you now, or do you expect to be, working in any other business or job?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
Are there any days or hours you would be unable or unwilling to work?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, please specify those days or hours you would be unable or unwilling to work.				
It is AIRPORT PARKING policy to hire only U.S. Citizens and aliens authorized to work in the United States. Employment is conditional on (1) presentation of identification and authorization to work documents and (2) certification of employment eligibility as required by the Immigration and Naturalization Service				
Are you authorized under the U.S. Immigration laws to work in the U.S. indefinitely on a full-time basis?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you ever been convicted of a felony?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
If Yes, Give Details				
Note: A felony conviction will not automatically disqualify you from consideration for employment.				
Do you have a valid drivers license			<input type="checkbox"/> YES <input type="checkbox"/> NO	
Drivers License # Class of License				
Have you had your driver's license suspended or revoked in the last ten years?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
If Yes, Give Details				
CAPABILITY/RELIABILITY:				
Would you be willing and able to perform all of the tasks required by the job you are applying for?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
If not, explain which tasks				
Have you filed any type of fraudulent claim against any of your present or past employers?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain				
Will you abide by the safety rules of this company?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you been disciplined for violating company safety rules or regulations?				
If yes, explain				
How many days of work (or school) have you missed in the last two years? _____				
How many times have you been late for work (or school) in the last two years? _____				
Would you be willing and able to report to work on time every day on a regular and consistent basis?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
If no, please explain				
EDUCATION	NAME/ADDRESS OF SCHOOL	NO. OF YRS ATTENDED	DIPLOMA/DEGREE CERTIFICATE	SUBJECTS STUDIED
HIGH SCHOOL/ GED				
COLLEGE				
GRADUATE				
VOCATIONAL/ TECHNICAL				
WHAT SKILLS/ADDITIONAL TRAINING DO YOU HAVE THAT ARE RELATED TO THE JOB FOR WHICH YOU ARE APPLYING?				
WHAT MACHINES OR EQUIPMENT CAN YOU OPERATE THAT ARE RELATED TO THE JOB FOR WHICH OUR ARE APPLYING?				

EMPLOYMENT HISTORY List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Attach additional sheets if necessary. **Please give month and year.**

Name of Employer		Job Title & Duties
Address		Dates of Employment From/To
City, State, Zip		Pay Start \$ Final \$
Supervisor	Telephone	Reason for leaving
Name of Employer		Job Title & Duties
Address		Dates of Employment From/To
City, State, Zip		Pay Start \$ Final \$
Supervisor	Telephone	Reason for leaving
Name of Employer		Job Title & Duties
Address		Dates of Employment From/To
City, State, Zip		Pay Start \$ Final \$
Supervisor	Telephone	Reason for leaving

Have you worked or attended school under any other name? YES NO
 If yes, give names _____

Are you presently employed? YES NO
 If yes, may we contact your present employer? YES NO

Give three references, not relatives or former employers.

Name	Address	Phone

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize AIRPORT PARKING to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or persons from any liability.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand that as part of my job description I may be required to drive. Because of this requirement, I understand that as a condition of employment I must present a copy of my driving record for insurance purposes only. I also understand that if I am called in for a second interview I may be required to have my driving skills evaluated. I understand that this part of the interview could take up to two hours.

I understand that as a condition of employment, I am required to submit a drug test at my own cost. I further understand that I may be subjected to random drug screening as part of the Company's Substance Abuse Policy and that if I am found in violation of such policy, I may be subject to discipline, including termination.

I understand that during major holidays I may be required to work overtime.

I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I HAVE READ, UNDERSTAND, AND BY MY SIGNATURE CONSENT TO THESE STATEMENTS.

Signature _____ Date _____

**APPLICANT/EMPLOYEE NOTIFICATION & AUTHORIZATION FOR RELEASE OF INFORMATION
ALL APPLICANTS MUST COMPLETELY FILL OUT THIS FORM**

A Consumer Report and/or an Investigative Consumer Report will be conducted on you in the course of consideration for employment or promotion.

I understand that in accordance with the Fair Credit Reporting Act, AIRPORT PARKING may obtain a Consumer Report and/or Investigative Consumer Report from a Consumer Reporting Agency on all individuals who apply for employment or who are the subject of an employment decision. I may request a copy of the report, should I be denied employment based on all or part of the report.

An Investigative Consumer Report is any written, oral or other communication of any information by a Consumer Reporting Agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is collected and used as a factor in establishing your eligibility for employment purposes. If an Investigative Consumer Report is conducted, I will be notified in writing within three days from request of said report.

I, _____, authorize all corporations, companies, business entities, former employers, business associates, personal associates, credit bureaus, consumer reporting agencies, educational institutions, law enforcement agencies, city, county, state and federal courts, military services, medical institutions, departments of motor vehicles and other entities which retain motor vehicle records and other persons to release information that they may have about me to the person or company with which this authorization has been filed, or their agent, Key Holdings, LLC.

I hereby release, AIRPORT PARKING, the organization with which this authorization has been filed, Key Holdings, LLC and all entities described above, including their officers, employees, or related personnel, both individually and collectively, from any and all liability for damage of whatever kind, which may at any time result because of compliance or any attempt to comply with this Applicant Notification/Authorization For Release of Information.

If hired, this Authorization shall remain on file and shall serve as an ongoing authorization for Key Holdings, LLC to procure Consumer Reports or Investigative Consumer Reports at any time during my employment period.

First Name: _____ Middle Name: _____ Last Name: _____

No Middle Name

Address: _____ DOB: _____

_____ SSN: _____

Previous Address (If living at current address for less than 6 months)
