



# EMPLOYMENT APPLICATION

Action Equipment Rental

*An Equal Opportunity Employer*

Each question should be fully and accurately answered. Incomplete applications may not be processed. Please print and use ink to complete this application.

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Application Date: \_\_\_\_\_

Position Applying For: \_\_\_\_\_

### Personal Information

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Address: \_\_\_\_\_ Apt/Unit#: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you at least (18) years of age? \_\_\_\_\_ Are you eligible to work in the U.S.? \_\_\_\_\_

Have you ever been employed by Action Equipment Rental? \_\_\_\_\_ When? \_\_\_\_\_

Do you have family members/significant other(s) working for Action Equipment Rentals? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Have you ever been convicted of a misdemeanor or felony? \_\_\_\_\_

If Yes, please explain: \_\_\_\_\_

A conviction record will not necessarily be a bar to employment, and factors such as time of the offense, seriousness/nature of the violation, job relationship and rehabilitation will be taken into consideration.

Can you perform the duties of the job for which you are applying with or without accommodations? (Y/N) \_\_\_\_\_

Do you have a valid driver's license in the State in which you are applying for? (Y/N) \_\_\_\_\_

Drivers License State: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ Drivers License Class: \_\_\_\_\_

### References

List three people to whom you are not related, who know your qualifications for the position for which you are applying. Do not repeat names of supervisors listed under work history:

Name	Telephone	Occupation	Years Known

### Education

High School: Name \_\_\_\_\_ Did you Graduate? \_\_\_\_\_ Grade Completed \_\_\_\_\_

College: School	Dates Attended	Date Graduated	Degree (Y/N)	Major

**Other Job Related Education, Licenses, and/or Certifications:**

**Job Related Skills (e.g. mechanical, typing, computer, construction equipment, sales, welding, etc.):**

**Past Employment** (Start with the most recent employer)

<b>Name of Employer</b>	<b>Supervisor(s):</b>
<b>Address</b>	<b>Employment Dates:</b>
<b>City, State, Zip</b>	<b>Ending Wage / Pay Rate:</b>
<b>Telephone</b>	<b>Reason For Leaving:</b>

**Title/Duties:**

<b>Name of Employer</b>	<b>Supervisor(s):</b>
<b>Address</b>	<b>Employment Dates:</b>
<b>City, State, Zip</b>	<b>Ending Wage / Pay Rate:</b>
<b>Telephone</b>	<b>Reason For Leaving:</b>

**Title/Duties:**

<b>Name of Employer</b>	<b>Supervisor(s):</b>
<b>Address</b>	<b>Employment Dates:</b>
<b>City, State, Zip</b>	<b>Ending Wage / Pay Rate:</b>
<b>Telephone</b>	<b>Reason For Leaving:</b>

**Title/Duties:**

**BY SIGNING YOUR NAME BELOW, YOU UNDERSTAND THAT NOTHING CONTAINED IN THIS APPLICATION OR IN THE INTERVIEW PROCESS IS INTENDED TO CREATE A CONTRACT, GUARANTEE, PROMISE, OR COVENANT OF ANY TYPE BETWEEN THE COMPANY AND YOU. SHOULD THIS APPLICATION RESULT IN YOUR EMPLOYMENT, THAT EMPLOYMENT IS AT-WILL, MEANING, YOU OR THE COMPANY MAY TERMINATE YOUR EMPLOYMENT AT ANY TIME AND FOR ANY REASON, WITH OR WITHOUT ANY SPECIFIC DISCIPLINARY PROCEDURES. YOU FURTHER UNDERSTAND THAT NO REPRESENTATIVE OF THE COMPANY OTHER THAN ITS CHIEF EXECUTIVE OFFICER HAS ANY AUTHORITY TO ENTER INTO ANY GUARANTEE WITH YOU FOR ANY SPECIFIED PERIOD OF TIME OR TO GUARANTEE SOME OTHER PERSONNEL MOVE OR BENEFIT. YOU FURTHER UNDERSTAND THIS ENTIRE STATEMENT APPLIES TO THE PERIOD PRIOR TO OR AFTER YOU MAY BE EMPLOYED.**

You authorize the work and personal references listed in the application, and any other individuals you may name, to give the Company or its designee any and all information concerning your previous employment and any pertinent information they may have, personal or otherwise, and release all such parties from all liability for any damages that may result from furnishing such information to the Company.

You understand that any offer of employment which might be made on behalf of the Company is conditioned, to the extent permitted by law, upon your satisfactorily passing a medical examination which may be required by the Company (including, but not limited, to any drug screening test), and upon any criminal conviction history, either prior to starting employment or any time during employment. By your completion and execution of this application, you give your consent to any such test or examination and to the release of the results of any such test or examination to the appropriate designee of the Company.

You certify that all statements on this application are true and complete, and understand and agree that false statements on this application shall be sufficient cause for rejection of this application or termination of employment.

You must meet employability requirements of the U.S. Department of Justice Immigration and Naturalization Service and submit appropriate documentation in order to satisfy the requirements for completing INS Form I-9.

Pre-employment testing for illegal drugs may be required. The test must clearly show a negative result. Positive, marginal, or questionable results will result in rejection of this application.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**INTERVIEWED BY:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_