



7 Sawgrass Drive Bellport, NY 11713 Ph: 631-345-9500 Fax: 631-345-9580 www.altparts.com

Employment Application

The Civil Rights Act of 1964 prohibits discrimination in employment based on race, color, gender, religion or national origin. Discrimination on the basis of age is also prohibited with respect to individuals who are at least 40 years of age, but less than retirement age. The provisions of The Americans with Disabilities Act of 1990, prohibits discrimination against qualified individuals with disabilities in the job application process.

APPLICANT INFORMATION					
First Name		Last		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	DOB
Phone		E-mail Address			
Date Available		Social Security No.		Desired Salary	
Position applied for:				Full Time/Part Time (circle one)	
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	
<i>(conviction will not necessarily disqualify applicant)</i>					
EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
<i>Please list two personal references (non-family):</i>					
Full Name					

Phone number	
Address	
Full Name	
Phone number	
Address	

PREVIOUS EMPLOYMENT

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

If no, please provide an alternate reference:

MILITARY SERVICE

Branch	From	To
If other than honorable discharge, please explain		

Please indicate additional information that relates to your ability to perform the job for which you have applied to include special training:

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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