

RNA RENTAL, LLC CONTROLLED DOCUMENT	Sect: Personnel II_4_b	Rev. Date: 07/22/10
	Title: APPLICATION FOR EMPLOYMENT	Approved: RNA Sr.
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Wonderlic Score: _____

Personal Information

NAME (LAST NAME FIRST)		SOCIAL SECURITY NO.		DATE
PHONE NO.	PRESENT ADDRESS	CITY	STATE	ZIP CODE
()	PERMANENT ADDRESS	CITY	STATE	ZIP CODE

If the position for which you are applying requires operation of a company vehicle &/or handling company cash, answer the following:

Have you had any driving or DUI accidents:
Have you had any adverse police record, dishonesty or behavioral problems?

EMPLOYMENT DESIRED

Position	Date You Can Start	Min. Wage Req.	
Are You Employed?	Yes	No	Do you have any work limitations, including weekends?
Ever Applied To This Company Before?	Yes	No	Where? When?

EDUCATION & TRAINING HISTORY

	Name & Location of School	Years Attended	Did You Graduate	Subjects Studied
High School				
College				
Trade, Business or Correspondence				
Computer Skills				
Subjects of Special Study/Research Work or Special Training/Skills Rental Property Experience				
US Military or Naval Service		Rank		

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

Date Month & Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

REFERENCES (GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR)

Name	Address	Business	Years Known

AUTHORIZATION

"I certify that the facts contained in this application and interview are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application or interview shall be grounds for dismissal.

I authorize investigation of all statements contained herein and during the interview and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

I also authorize RNA Management, LLC to perform a criminal background and a credit history check on behalf of considering my application.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Date	Signature
Interviewed By	Date

DO NOT WRITE BELOW THIS LINE

Remarks				
Neatness		Character		
Personality		Ability		
Hired	Department	Position	Will Report	Salary Wages
REQUIRED APPROVAL	Employment Manager	Department Head		General Manager

USE BACK IF NEEDED