



APPLICANT NAME:

DATE:

2323 E. Bennett St. Springfield MO 65804 (417) 881.2240 Mechanic@BhannonAutoServices.com

Application for Employment Automotive Technician

We are an equal opportunity employer and do not discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services and program is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

APPLICATION INSTRUCTIONS

1. Complete all sections of the application.
2. If your resume contains requested information, attach your resume instead of filling in a section or sections.
3. Sign and date the application once it is completed.

Personal Data

Last Name	First Name	Middle Name
Address		
City	State	Zip Code
Cell Phone	Other Phone, please specify.	
Email Address	Social Security Number	
Type of Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Salary/Wage Expectations:	



	When would you be able to start?
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Why do you feel you are qualified for this position?

Are you currently employed?	If so, where?
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Do you use tobacco? Yes No Do you have a valid driver's license? Yes No

What level of technician would you classify yourself as? (Check Appropriate Box: A, B, C or D)

- A- Level Technician is an ASE Master Technician Highly Skilled in all levels of repair, diagnostics and maintenance
- B- Level Technician is an ASE Certified Mechanic that will have strengths and weaknesses in all areas
- C- Level Technician is proficient in oil changes, brakes and other basic repairs
- D- Level Technician would be an apprentice just entering into the industry

How long have you been at your present address?	Do you have a valid Driver's License? If Yes, are you insurable?
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Have you ever been convicted of any crime(s), either misdemeanor or felony (other than minor traffic infractions)? Yes No *If yes, please provide thorough explanation:*

Activities and Interests (exclude any organization or society name of which indicates the race, religious creed, color, national origin or ancestry of its members).

List any other skills, qualifications or experience that may help in this position:

Please give me **5** words that describe you

1.	2.	3.	4.	5.
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WORK EXPERIENCE

List your last 3 employers, include any military experience.

If presently employed, may we contact your present employer? Yes No



Current Position		Name and Address		City, State Zip	
Telephone	Name of Supervisor	Position Held		Date Started	
Main Duties:					
Reason for Wanting to Leave:				Current Rate of Pay	
If you could have changed anything at this job, what would you have changed?					



2nd Last Position		Name and Address		City, State Zip	
Telephone	Name of Supervisor	Position Held		From(YY/MM)	To (YY/MM)
Main Duties:					
Reason for Leaving:				Final Rate of Pay	
If you could have changed anything at this job, what would you have changed?					



3 rd Last Position		Name and Address			City, State Zip	
Telephone		Name of Supervisor	Position Held		From(YY/MM)	To (YY/MM)
Main Duties:						
Reason for Leaving:					Final Rate of Pay	
If you could have changed anything at this job, what would you have changed?						

REFERENCES

Only list people you have known for more than a year

Name of a Service Advisor/Employer	Length of Time Known	Phone	Email Address
Name / Relationship	Length of Time Known	Phone	Email Address
Name / Relationship	Length of Time Known	Phone	Email Address

EDUCATION

Name of School		Location of School	Graduated?		Completed Years / Mo.	Degree Received	Major Subject
High School			Yes	No			
Business or Trade School			Yes	No			



College or University			Yes	No				
Do you plan to continue your education? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, When? _____								

ASE CERTIFICATIONS

Please select all that apply and include expiration dates

	Expires
<input type="checkbox"/> Engine Repair	<input type="checkbox"/> Heating / Air Conditioning
<input type="checkbox"/> Automatic Transmission/Transaxle	<input type="checkbox"/> Engine Performance
<input type="checkbox"/> Manual Drive Train/Axles	<input type="checkbox"/> L1 Advanced Engine Performance
<input type="checkbox"/> Suspension & Steering	List any other ASE Certificates here:
<input type="checkbox"/> Brakes	
<input type="checkbox"/> Electrical / Electronics	

SKILL AND EXPERIENCE ASSESSMENT

What is the approximate value of your tools and equipment?

What diagnostic equipment are you experienced in using?

Which repair or estimating programs are you proficient with?

What technical courses/training or seminars have you attended in the last year?

Rank the make of cars you feel you have the most experience in:

1.	2.	3.	4.	5.
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Rate your experience on the following systems:		Master Tech	Journey Level	Apprentice Level	Little or None
Engine Performance/Tune					
Electrical & Computer Diagnosis					
Emission Testing and Diagnosis					
Heating & Air Conditioning					
Engine Repair					
Brake, Suspension and Steering					
Automatic Transmissions					
Manual Transmissions					
Routine Maintenance & Servicing					

Do you have any physical problems that will restrict your abilities to service and repairs cars, such as lifting heavy objects like wheel's, cylinder heads, etc. or bending over long periods of time while working under the hoods of cars, color blindness, eye issues, hearing issues? Yes No If Yes, please explain:

If you were to create a maintenance schedule for an average 10 year old car, what mileage/month intervals would you recommend the services be for:

Oil Changes		Coolant	
ATF Service		Fuel Injection Cleaning	
Shocks/Struts		Hoses	
Brake Fluid		Belts	

RELEASE AND AUTHORIZATION STATEMENT

The information given is true and correct, and I understand that if I am employed, any misrepresentation, false statement, or omission of consequence herein, found by you at the time, will be sufficient cause to terminate my employment. I authorize the verification of any or all information as listed above. As a condition of employment, if employment is offered, I must be authorized to work in the U.S. and demonstrate that authorization as required by the Immigration Reform and Control Act of 1986.

I also understand that neither the application nor a commitment of employment by Bohannon Auto Services constitutes a contract of employment.

Applicant Signature Print Name Date