

# Sahara Motors, Inc. & Sahara Motors Ely, LLC

## EMPLOYMENT APPLICATION

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

Name: \_\_\_\_\_  
 Last  First  M.I.

Address: \_\_\_\_\_  
 Street address  City  State  ZIP

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Email address: \_\_\_\_\_ Are you a veteran?  Yes  No

List the positions you are interested in by specific title (typist, carpenter, auto mechanic)

1<sup>st</sup> choice: \_\_\_\_\_ 2<sup>nd</sup> choice: \_\_\_\_\_

Available to work:  Full time  Temporary  Part time

Date you can start: \_\_\_\_\_ Desired salary: \_\_\_\_\_

Are you employed now?  Yes  No If yes, may we contact your present employer?  Yes  No

Do you have a valid driver's license?  Yes  No If yes, State & Number: \_\_\_\_\_  
 If no, explain: \_\_\_\_\_

Trade or professional licenses, certificates or registrations: \_\_\_\_\_

**References:** Three persons not related to you whom you have known at least one year:

Name	Address	Telephone/Business/Occupation

**Education:**

Are you a high school graduate?  Yes  No If no, indicate highest grade completed (1–12): \_\_\_\_\_

College, Business or Trade Schools (Name and Location)	Major or Vocational Subjects	Length of Time Degree/Certificate

Continued on other side

**Work History:** Beginning with the present or most recent, list your three most significant employers. If you wish to elaborate, you may attach a supplemental sheet or resumé. Include military service, if applicable.

Firm name: _____	Dates of employment: _____		
Address: _____			
Street address	City	State	ZIP
Job title, responsibilities and duties: _____			

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Address: _____			
Street address	City	State	ZIP
Job title, responsibilities and duties: _____			

**Additional qualifications and skills:** machines, equipment, tools used, related activities, etc.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Certification of Applicant:**  
 I certify that all statements made in this application are true and correct and that any misstatement of material facts may subject me to disqualification or dismissal. Also, I authorize verification of all statements made in this application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Equal Opportunity Employer/Program***

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital, or veteran status, or any other legally protected status.