

# COUSINEAU AUTO INC

A PART OF THE FUTURE

Please fill out the application below to the best of your ability, then e-mail it to us at [bill@goodparts.biz](mailto:bill@goodparts.biz)

As an Equal Opportunity Employer, this organization does not discriminate on the basis of race, color, religion, sex, national origin, age, disability or veteran status. All information provided in this application will be treated confidentiality and will be used only to help ensure the best use of your abilities if you are employed by us.

Name \_\_\_\_\_  
First Middle Last

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_  
Street Address

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

How did you hear about us? ☐ Friend ☐ TV ☐ Print ☐ Radio ☐ Internet ☐ Other

What date are you available for work? \_\_\_\_\_

What type of position do you desire? ☐ Full-time ☐ Part-time ☐ Temporary ☐ Seasonal ☐ Co-op

Are you 18 years old or older? ☐ Yes ☐ No

Have you ever been employed here before? ☐ Yes ☐ No

Are you legally eligible for employment in the United States? ☐ Yes ☐ No

Are you employed? ☐ Yes ☐ No

Are you able to meet the attendance requirements for this position? ☐ Yes ☐ No

What is your desired salary range or hourly rate of pay? \_\_\_\_\_

## Skills and Qualifications

Please summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Education	Name & City	Years Completed	Graduate?	Course of study
Highschool			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business, trade, or other			<input type="checkbox"/> Yes <input type="checkbox"/> No	

References	Name	Phone Number	Business	Years Known
1				
2				
3				

## Employer History

Provide the following information for your past employers, assignments or volunteer activities, starting with the most recent.

From	To	Employer
Job Title		Address
Please summarize the nature of your work / responsibilities.		
Reason For Leaving		
Hourly Rate / Salary	Start	Finish

From	To	Employer
Job Title		Address
Please summarize the nature of your work / responsibilities.		
Reason For Leaving		
Hourly Rate / Salary	Start	Finish

From	To	Employer
Job Title	Address	
Please summarize the nature of your work / responsibilities.		
Reason For Leaving		
Hourly Rate / Salary	Start	Finish

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by the Company (hereinafter referred to as "Cousineaus") that such employment with Cousineaus is at will, for no specified duration and may be terminated by either Cousineaus or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of Cousineaus or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of Cousineaus except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of Cousineaus.

In consideration for employment with Cousineaus, if employed, I agree to conform to the rules, regulations, policies and procedures of Cousineaus at all times and understand that such obedience is a condition of employment. I understand that due to the nature of Cousineaus business, attendance and punctuality are considered essential requirements of every job at Cousineaus and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with Cousineaus, I may be required to submit to a pre-employment drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to Cousineaus and/or any of its representatives, agents, or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for six months. If I wish to be considered for employment after this period I must fill out and submit a new application.

COUNSINEAU AUTO PARTS, INC. IS PROUD TO BE AN EQUAL OPPORTUNITY EMPLOYER, ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW.

BY SIGNING THIS FORM, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND AND AGREE TO THE ABOVE STATEMENTS

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SIGNATURE

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DATE