

APPLICATION FOR EMPLOYMENT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department. Position(s) applied for Date of application ☐ Relative ☐ Walk-In Referral Source Advertisement Employee ☐ Employment Agency Government Employment Agency Other - Name of source (if applicable) Name LAST FIRST MIDDLE Address STREET CITY STATE ZIP Cell () E-mail Address Telephone () If yes, give Date(s) and Position(s) Have you ever been employed by Lane Automotive? If yes, give dates ______ From ___ / ___ / ___ To ___ / ___ / If no, please explain Are you legally eligible for employment in this country? Will you relocate if the job requires it? ☐ Yes ☐ NoWill you travel if the job requires it? ☐ Yes ☐ No Desired salary?....\$ Date available for work / / Type of employment desired Full-Time Part-Time Temporary Seasonal Educational Co-Op Indicate your availability to work: __ Days __ Nights __ Weekends Day Sunday Monday Tuesday Wednesday Thursday Friday Saturday From: To: If no (or cannot), please explain If yes, please provide date(s) and details ANSWERING "YES" TO THESE QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT. FACTORS SUCH AS DATE OF THE OFFENSE. SERIOUSNESS AND NATURE OF THE VIOLATION, REHABILATATION AND POSITION APPLIED FOR WILL BE TAKEN INTO ACCOUNT. Driver's License Number (if driving is an essential job function)

State

EDUCATIONAL BACKGROUND

List last three (3) schools attended, starting with most recent. List the number of years completed. Indicate degree or diploma earned, if any, along with grade point average. Include major and minor fields of study (if applicable).

SCHOOL / ADDRESS	YEARS COMPLETED	DID YOU GRADUATE?	GRADE POINT	MAJOR	MINOR

REFERENCES

List three (3) business	work references. If not applicable, list three so	hool or personal reference	es. Do not list relatives.
NAME	HOW DO YOU KNOW THIS REFERENCE?	YEARS KNOWN	TELEPHONE
			()
			()
			()
List professional, trad exclude memberships that wou similarly protected status	e, business or civic associations and any office		ETERAN/RESERVE NATIONAL GUARD OR ANY OTHER
ORGANIZATION OFFICES HELD			CES HELD
		01110	
List special accomplis EXCLUDE MEMBERSHIPS THAT WOU SIMILARLY PROTECTED STATUS	chments, publications, awards, etc.	E, MENTAL OR PHYSICAL DISABILITIES, VI	ETERAN/RESERVE NATIONAL GUARD OR ANY OTHER
Why should we hire y	ou?		

EMPLOYMENT HISTORY

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

EMPLOYER	TELEPHONE # ()	DATE EMPLOYED FROM	DATE EMPLOYED TO	Summarize the type of work performed and your job responsibilities
STREET ADDRESS, CITY, STATE, ZIP		TROM	10	
STARTING JOB TITLE & FINAL JOB TITLE		STARTING RATE OF PAY	PER	
IMMEDIATE SUPERVISOR & TITLE		FINAL RATE OF PAY \$	PER	
MAY WE CONTACT FOR REFERENCE? ☐YES ☐ N	NO LATER	REASON FOR LEAVING		
EMPLOYER	TELEPHONE #	DATE EMPLOYED	DATE EMPLOYED	Summarize the type of work performed and your
STREET ADDRESS, CITY, STATE, ZIP	()	FROM	TO TO	job responsibilities
STARTING JOB TITLE & FINAL JOB TITLE		STARTING RATE OF PAY \$	PER	
IMMEDIATE SUPERVISOR & TITLE		FINAL RATE OF PAY \$	PER	
MAY WE CONTACT FOR REFERENCE? ☐ YES ☐ N	NO LATER	REASON FOR LEAVING	1	
EMPLOYER	TELEPHONE # ()	DATE EMPLOYED	DATE EMPLOYED TO	Summarize the type of work performed and your job responsibilities
STREET ADDRESS, CITY, STATE, ZIP		FROM	10	
STARTING JOB TITLE & FINAL JOB TITLE		STARTING RATE OF PAY	PER	
IMMEDIATE SUPERVISOR & TITLE		FINAL RATE OF PAY \$	PER	
MAY WE CONTACT FOR REFERENCE? ☐YES ☐ N	NO LATER	REASON FOR LEAVING		
Explain any gaps in employment:	SKILLS & Q	UALIFICAT	TIONS	
Summarize any special training, skil	ls, licenses and/or certi	ficates that may qual	ify you as being	able to perform job-related
functions in the position for which y				- •
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APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with Lane Automotive, Inc. is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, Lane Automotive, Inc., it's representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I herby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that Lane Automotive, Inc. does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and Lane Automotive, Inc. reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing expressed language are valid unless they are in writing and signed by the company ownership.

I agree that any action or suit against Lane Automotive, Inc. arising out of my employment or termination of employment, including but not limited to, claims arising under State, or Federal civil rights statutes, must be brought within 180 days of the event giving rise to the claims or be forever barred. I waive any limitation periods to the contrary.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT					
I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.					
Signature of ApplicantDa	ate	_/	/		

If you are submitting this form electronically, **your typed name constitutes your signature** and **must be added last.** Once signed, you may submit the form – Check all items first.

Upon submitting this form, it will be attached to an email. You will have the opportunity to attach additional relevant documents such as a resume before pressing send.

We would appreciate your filling out Page 5, the Affirmative Action Voluntary Information Form.

Lane Automotive, Inc. is an Equal Opportunity Employer

www.laneautomotive.com | 1-800-772-5266



Affirmative Action Voluntary Information

PLEASE PRINT

COMPLETION OF INFORMATION BELOW IS VOLUNTARY

We consider all applicants for positions without regard to race, color, religion, sex, height, weight, familial or marital status, national origin, citizenship, age, pregnancy, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We comply with all applicable laws governing employment

practices and do not discriminate on the basis of any unlawful criteria. In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is voluntary. It is not a part of your official application for employment and will not be used in any employment decision. Upon submittal this data is detached from the employment application. The information provided will be used and kept separate and confidential in accordance with applicable laws and regulations. Position(s) applied for ☐ Employee ☐ School ☐ Relative □ Walk-In Referral Source Government Employment Agency ☐ Private Employment Agency ☐ Advertisement – Source Name of person who referred you (if applicable) APPLICANT INFORMATION MIDDLE Address STREET STATE ☐ Male Female Please check the following Equal Employment Opportunity Identification Group(s): White (not of Hispanic Origin) ☐ Black (not of Hispanic Origin) ☐ Hispanic ☐ American Indian/Alaskan Native ☐ Asian ☐ Multi-Rac Multi-Racial (having parents of different races) Native Hawaiian/Other Pacific Islander ☐ Decline Completed by ______ Date ___/___

Please return to page 4 to submit your application.

(Typed Signature)