



**An Equal Opportunity Employer**

# EMPLOYMENT APPLICATION

Please read carefully, write clearly and answer all questions completely. Only candidates that fully complete all required sections of this application, except for sections marked "voluntary," will be considered for employment. Not all applicants will be interviewed; only those interviewed will receive a response from the Company. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or an other legally protected status.

## PLEASE PRINT

Last Name		First Name		Middle Name
Address	Street	City	State	Zip Code
How long have you lived at this address? (If less than 5 years, provide your former address)				
Business or Home Telephone (       )       -		Cellular Telephone (       )       -		Email Address

Position applying for \_\_\_\_\_ Date of application \_\_\_\_/\_\_\_\_/\_\_\_\_

Applying for: ☐ Regular Full-Time Work ☐ Regular Part-Time Work ☐ Temporary Work

How did you learn about us? \_\_\_\_\_

What days/hours or "temporary period" are you available to work? \_\_\_\_\_

Available to work overtime, if necessary? (Total hours & schedule at discretion of the company) ☐ Yes ☐ No

Date available to start work \_\_\_\_/\_\_\_\_/\_\_\_\_ Salary or hourly rate desired? \$

Have you ever applied to work for Gibbs Truck Centers before? ☐ Yes ☐ No

If yes, when? \_\_\_\_/\_\_\_\_/\_\_\_\_ What position? \_\_\_\_\_

Have you ever been employed with Gibbs Truck Centers before? ☐ Yes ☐ No

If yes, when? \_\_\_\_/\_\_\_\_/\_\_\_\_ What position? \_\_\_\_\_

Do you have any friends or relatives working for Gibbs Trucks Centers? ☐ Yes ☐ No

If yes, state names & relationship \_\_\_\_\_

If the position requires you to drive a vehicle, can you provide proof of your legal right to drive in CA? ☐ Yes ☐ No

If hired, would you have a reliable means of transportation to and from work? ☐ Yes ☐ No

Can you travel if job requires it? ☐ Yes ☐ No

Are you at least 18 years old? ☐ Yes ☐ No  
*(If under 18, hire is subject to verification that you are of minimum legal age and have a valid student work permit.)*

If hired, can you present documentation establishing your legal right to employment in the United States? ☐ Yes ☐ No  
*(Proof of citizenship or immigration status will be required upon employment)*

Have you ever lost or been denied a security clearance? (If yes, please explain) ☐ Yes ☐ No

Are you currently employed? ☐ Yes ☐ No May we contact your employer(s)? ☐ Yes ☐ No

Are you able to perform the essential functions of the job for which you are applying,  
with or without reasonable accommodation? ☐ Yes ☐ No

If no, describe the functions that cannot be performed \_\_\_\_\_

EDUCATION

School	Name & Address	Course of Study	# of Years Completed	Did you Graduate?	Degree/Diploma
High School				Y / N	
College/ University				Y / N	
Vocational/ Business				Y / N	

EMPLOYMENT HISTORY

Starting with your most recent employer list below all present and past employment, whether paid or unpaid. Account for all periods of unemployment. Attach extra pages if necessary. You must complete this section even if attaching a resume. If currently employed, state why you are seeking other employment under “Reason for Leaving”).

Employer	Dates of Employment    From    /    /    To    /    /
Type of Business	Your Work Performed
Address	
City/State	
Telephone #                      (                      )                      -	Supervisor's Name
Your Job Title	Supervisor's Title
Reason for Leaving	

Employer	Dates of Employment    From    /    /    To    /    /
Type of Business	Your Work Performed
Address	
City/State	
Telephone #                      (                      )                      -	Supervisor's Name
Your Job Title	Supervisor's Title
Reason for Leaving	

Employer	Dates of Employment From / / To / /
Type of Business	Your Work Performed
Address	
City/State	
Telephone # ( ) -	Supervisor's Name
Your Job Title	Supervisor's Title
Reason for Leaving	

Employer	Dates of Employment From / / To / /
Type of Business	Your Work Performed
Address	
City/State	
Telephone # ( ) -	Supervisor's Name
Your Job Title	Supervisor's Title
Reason for Leaving	

\* Explanation of any gaps in employment: \_\_\_\_\_

ADDITIONAL INFORMATION

Do you have any other professional trade experience, training, qualifications, skills or extra-curricular activities which you feel make you especially suited for work at Gibbs Truck Centers? If so, please explain:

MILITARY SERVICE

Have you obtained any special skills or abilities as the result of military service that may relate to the position for which you are applying? If yes, please explain:

\* Volunteer Activities: \_\_\_\_\_

## REFERENCES

List 3 people not related to you who have knowledge of your work performance within the last 5 years.

Name	Occupation			
Telephone # (       )       -	Number of Years Acquainted			
Address	Street	City	State	Zip Code

Name	Occupation			
Telephone # (       )       -	Number of Years Acquainted			
Address	Street	City	State	Zip Code

Name	Occupation			
Telephone # (       )       -	Number of Years Acquainted			
Address	Street	City	State	Zip Code

## APPLICANT'S STATEMENT (please read carefully & sign below)

- I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.
- I understand that people employed at Gibbs Truck Centers ("Company") have access to confidential information regarding various phases of the Company business. Therefore, the Company requires new employees, as a condition of employment, to sign a Confidentiality Agreement.
- I understand that information concerning competitors' operations, products, designs or other proprietary information will not be solicited from an applicant for employment, or from the Company's employees. The Company will honor any valid post-employment restrictions contained in an applicant's employment contract and fully respects the applicant's duty of loyalty and non-disclosure to a former employer.
- In consideration of my employment, if hired, I agree to conform to the rules and regulations set forth by the Company in its policies and practices or as directed by management.
- I understand that each employee of the Company is an at-will employee unless specifically notified otherwise in writing. That is, I may terminate our employment relationship at any time, for any reason, and the Company has the same right to terminate our employment relationship at any time and for any reason. I understand that this at-will relationship cannot be modified or changed during my employment except by specific written agreement between me and the Company, signed by the President.
- I understand that if offered employment, I may be required to submit to and pass a medical examination to assess my fitness for duty as a condition of beginning my employment.
- I understand that if offered employment, I may be required to submit to a drug and/or alcohol screen. I further understand that I must successfully pass such a screen as a condition of beginning my employment. If test results are not received until after I start employment, a positive test will result in my termination.
- I understand that if offered employment, I may be required to submit to a background and reference check as a condition of beginning my employment.
- I understand that if offered employment, I will be required to sign an agreement requiring me to arbitrate almost all claims I might have against the Company in the future. I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application in accordance with the terms of that Agreement.
- I certify that I have personally completed and reviewed all of the information about me contained in this application. I further certify under penalty of perjury that the information provided in this application is true and correct. I understand that if it is determined that the information contained in this application & my interview(s) are false or misleading, I will not be eligible for employment with the Company or, if I have already been hired, my employment will be terminated for falsification of Company documents.
- Thank you for applying to Gibbs Truck Centers!

Signature of Applicant \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_