

APPLICATION FOR EMPLOYMENT

Off Lease Only, Inc. is an Equal Opportunity Employer

Off Lease Only, Inc. and affiliates hereinafter (“the Company”) is an equal opportunity employer and does not discriminate in recruiting, hiring, training, promoting or other employment practices on the basis of race, color, ethnicity, ancestry, religion, gender/sex, marital status, national origin, pregnancy, disability, sexual orientation, veteran status or any other protected characteristic. No question in this application is intended to solicit information regarding protected characteristics, and you may omit any information that you believe would disclose any such protected characteristics. Please complete this application in its entirety, in your own handwriting and in ink, even if you are including a resume. If you require additional space for answers, please use an additional sheet(s) of paper and attach it to this application. Applicants requiring reasonable accommodation in the application and/or interview process should notify the Human Resources Director.

Please print and fill out all sections.

Applicant Information

Applicant Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Other \_\_\_\_\_

Email Address \_\_\_\_\_

Current Address:

Number and Street \_\_\_\_\_

City \_\_\_\_\_

State & Zip \_\_\_\_\_

Emergency Number \_\_\_\_\_

Emergency Contact \_\_\_\_\_

How were you referred to the Company? \_\_\_\_\_

Employment Positions

Position(s) applying for: \_\_\_\_\_

Are you applying for:

Temporary/Consulting work? [ ]Y [ ]N

Regular part-time work? [ ]Y [ ]N

Regular full-time work? [ ]Y [ ]N

If hired, are you willing to travel out of town or overnight if the job so requires? [ ]Y [ ]N

Salary Desired: \$\_\_\_\_\_

Personal Information:

Have you ever applied to/worked for the Company before? [ ]Y [ ]N

If yes, please explain (include date):\_\_\_\_\_

Do you have friends, relatives, or acquaintances working for the Company? [ ]Y [ ]N

If yes, state name and relationship: \_\_\_\_\_

If hired, would you have transportation to/from work? [ ]Y [ ]N

Are you at least 18 years old? (If under 18, hire is subject to verification of minimum legal age) [ ]Y [ ]N

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States? [ ]Y [ ]N

Current Florida Driver's License Number (a requirement for employment) \_\_\_\_\_

A satisfactory Motor Vehicle Report, as determined by the Company, may be required as a condition of employment.

If hired, are you willing to submit to and pass a controlled substance test? [ ]Y [ ]N

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? [ ]Y [ ]N

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

Have you ever been convicted of a criminal offense? [ ]Y [ ]N

If yes, describe the crime – state the nature of the crime(s), when and where convicted and disposition of the case. \_\_\_\_\_

Has a court of law ever withheld adjudication for a crime for which you were charged? [ ]Y [ ]N

If yes, please state the offense, date, court, location, disposition of case and any rehabilitation. \_\_\_\_\_

\_\_\_\_\_

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense or a court's adjudication of guilt being withheld. The above factors will be taken into consideration in determining your eligibility for employment.)

Have you ever been refused a bond in any former position? [ ] Y [ ] N

If yes, please state the reason and the date a bond was refused. \_\_\_\_\_  
\_\_\_\_\_

Have you ever been asked to resign from a position? [ ] Y [ ] N

If yes, please explain the circumstances. \_\_\_\_\_

Have you ever been discharged from a position or company? [ ] Y [ ] N

If yes, please explain the circumstances.

Have you ever held a position of trust (handling money or confidential material)? [ ] Y [ ] N

If yes, please specify \_\_\_\_\_

#### Education, Training and Experience

High School:

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

School City, State, Zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y [ ] N

Diploma earned: \_\_\_\_\_

College/University:

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

School City, State, Zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y [ ] N

Degree earned: \_\_\_\_\_

Vocational School:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y [ ] N

Degree/diploma?: \_\_\_\_\_

Military:

Branch: \_\_\_\_\_

Rank in Military: \_\_\_\_\_

Total Years of Service: \_\_\_\_\_

Skills/duties: \_\_\_\_\_

Related details: \_\_\_\_\_

Professional Certifications, Affiliations and/or Licenses (indicate State)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Work Experience

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, include the company's name. Attach additional sheets if necessary.

Name of Employer \_\_\_\_\_

Address \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Name of Last Supervisor: \_\_\_\_\_

Employment Dates: \_\_\_\_\_

Pay or Salary: Start \_\_\_\_\_ Final \_\_\_\_\_

Your Last Job Title: \_\_\_\_\_

Duties Performed: \_\_\_\_\_

Reason for Leaving (be specific): \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:

Does your present employer know of your plans to change employment? [ ] Y [ ] N

If not, when may we contact your employer?

Briefly state why you desire to make a change in employment \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name of Employer \_\_\_\_\_

Address \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Name of Last Supervisor: \_\_\_\_\_

Employment Dates: \_\_\_\_\_

Pay or Salary: Start \_\_\_\_\_ Final \_\_\_\_\_

Your Last Job Title \_\_\_\_\_

Duties Performed: \_\_\_\_\_

Reason for Leaving (be specific): \_\_\_\_\_

References (Please provide three previous employer references)

Company	City, State	Name	Telephone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- A. This application will be given every consideration; however, its receipt does not imply that I will be employed. Further, I understand that if I am employed by the Company, I do not have a contract of employment for a specific duration, that my employment will be at-will and will not be for any definite duration of time, and that my employment may be terminated, with or without cause or notice, either by the Company or by me.
- B. I understand that a consumer report, including an investigative consumer report which includes a Credit check, a Motor Vehicle Records check and a Criminal Background check containing information as to my character, general reputation, personal characteristics and credit, will be obtained for employment purposes as part of the pre-employment background investigation and may occur again at any time during my employment, if I am employed. My signature below shall authorize a third party, hired by the Company, to conduct a consumer report and/or investigative consumer report for employment purposes, to investigate all statements I have made in connection with my application for employment and to obtain any transcripts, records or documents pertaining to my background, education and/or prior employment. I hereby release and fully discharge the Company, its affiliates or assigns, its directors, officers, employees and agents, arising out of the making, or use of, either a consumer report and/or investigative report, including any errors or omissions contained or omitted from such reports or investigations. If hired, this authorization will remain on file and shall serve as an ongoing authorization for a third party, hired by the Company, to conduct credit reports and/or investigative consumer reports at any time during my employment. I also understand that I will not be considered for employment without submitting a signed consumer report and /or investigative consumer report Consent and Disclosure form and that my employment is subject to the results of the consumer report for both pre-employment background investigation and at any time during my employment.
- C. Should I be employed, I agree to read the Company's Employee Handbook and sign an acknowledgement of receipt and understanding of the Employee Handbook. In addition, if hired, I will abide by the Company's policies and procedures during my employment. If hired, I understand that I will be subject to a 90 day probationary period upon my hire during which time my performance and strict adherence to policies and standards will be required for continued employment beyond the probationary period. I fully understand that all information, whether written, spoken or otherwise communicated or obtained, and all files and records

relating to the business of the Company or to anyone with whom the Company has dealings, constitutes confidential and privileged information and must be treated in a strictly confidential manner. I fully understand and agree that should I become employed by the Company, I am not to, and will not at any time, communicate or reveal any business of the Company or any confidential information, records, files or the matters contained therein, to unauthorized personnel within or external to the Company. I also understand that any violation of the foregoing may result in disciplinary action, including suspension without pay and termination of employment.

- D. I fully understand that the Company employs only U.S. citizens and those individuals authorized by the U.S. Government to work in the U.S. and that should I become employed, federal law requires me to furnish to the Company proof of my identity and employment authorization, and to sign a statement under penalty of perjury verifying my eligibility for employment as a citizen or national of the United States or an otherwise employable alien.
- E. I understand that the Company is a Drug Free Workplace and has a policy (the "Policy") against the use, possession or distribution of illegal drugs including the abuse of alcohol by its employees. I further understand that violations of the Policy may result in disciplinary action, up to and including suspension without pay and termination of employment. I also understand that I am required to submit to a drug test in connection with my employment and/or my application for employment and I agree to such a drug test.
- F. I hereby authorize and request that my current and all former employers furnish the Company with information about my employment record, including statements of the reason for the termination of my employment, work performance, abilities and other qualities pertinent to my qualifications for employment. I am hereby releasing my current and former employers and the Company from all liability and responsibility arising from any information provided. In addition, should I become employed by the Company, I expressly authorize the Company or its designees to release information about my job performance, job qualifications and suitability for employment to potential future employers who may request such information during my employment or after my employment terminates, and I expressly release the Company from any liability for disclosing such information.

I CERTIFY THAT ALL STATEMENTS MADE BY ME ON THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I HAVE WITHHELD NOTHING THAT WOULD, IF DISCLOSED, AFFECT THIS APPLICATION UNFAVORABLY. I UNDERSTAND THAT ANY MISREPRESENTATION OR OMISSION OF FACT IN THIS APPLICATION OR THE HIRING PROCESS WILL BE CAUSE FOR REFUSAL OF EMPLOYMENT OR, IF EMPLOYED, TERMINATION FROM THE COMPANY. I HEREBY ACKNOWLEDGE THAT I HAVE READ THE ABOVE CERTIFICATION, AND I RELEASE, UNDERSTAND AND AGREE TO THE SAME.

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

Print Name \_\_\_\_\_