

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Sunset Automotive Group is an Equal Opportunity Employer and does not discriminate in employment practices on the basis of race, color, religion, sex, national origin, age, disability, genetic information, veteran status or any other characteristics protected by law.

Instructions: We request the following information to help us make the best possible placement. Please complete all sections of the application that apply to you truthfully and completely.

PERSONAL DATA

Name							
(1	(Print) Last First					Midd	le
Present							
Address _					How long?		
D	Street and Number	City	State	Zip			
Previous							
Address _	Street and Number	City	State	Zip	How long?		
	Street and Number	City	State	Ζip			
Telephor	ne Number			[] Cell	[] Work [] Home	[] Other
Email							
Are you 1	18 years of age or older? []Yes []No					
If hired, o	can you furnish proof you are	eligible to work in the U.	S.? [] Yes	[] No	C		
JOB INF	ORMATION						
Position	you are applying for			Salary	/ desired		
Are you s	seeking a Full Time or Part tim	e position? [] Full Tin	ne []Part	Time			
Have you	ever worked for any dealers	nips owned by Sunset Au	tomotive Gro	oup? []Yes []No	D	
I	f Yes, please give dates and po	osition					
Do you h [] Yes	ave any friends or relatives th [] No	at are currently and/or w	vere previous	sly emplo	oyed by Sunset	Automoti	ve Group?
I	f Yes, please give name and re	elationship					
How did	you hear about us?						
Were you	u referred by a current emplo	yee? [] Yes [] No					
It	f Yes, please provide name an	d dealership					
-	,	I ⁻					

PREVIOUS EMPLOYMENT

List the names of your present and previous employers in chronological order with present or most recent employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If selfemployed, give firm name and supply business references.

	\$		
To (Mo/Yr)	End \$	Name and Title of Last Supervisor	May we contact?
Employed From (Mo/Yr)	Pay Rate Start S	Your Title or Position	Reason for Leaving
	Ý		
To (Mo/Yr)	End \$	Name and Title of Last Supervisor	May we contact?
Employed From (Mo/Yr)	Pay Rate Start S	Your Title or Position	Reason for Leaving
	Ý		
To (Mo/Yr)	End \$	Name and Title of Last Supervisor	May we contact?
Employed From (Mo/Yr)	Pay Rate Start	Your Title or Position	Reason for Leaving
	Ļ		
To (Mo/Yr)	End \$	Name and Title of Last Supervisor	May we contact?
	Employed From (Mo/Yr) To (Mo/Yr) Employed From (Mo/Yr) To (Mo/Yr) Employed From (Mo/Yr)	\$Employed From (Mo/Yr)Pay Rate Start \$To (Mo/Yr)End \$Employed From (Mo/Yr)Pay Rate Start \$To (Mo/Yr)End \$Employed From (Mo/Yr)Pay Rate Start \$To (Mo/Yr)End \$Employed From (Mo/Yr)Pay Rate Start \$To (Mo/Yr)End \$Employed From (Mo/Yr)Pay Rate Start \$To (Mo/Yr)End	\$\$Employed From (Mo/Yr)Pay Rate Start \$Your Title or PositionTo (Mo/Yr)End \$Name and Title of Last Supervisor \$Employed From (Mo/Yr)Pay Rate Start \$Your Title or PositionTo (Mo/Yr)End \$Your Title or PositionTo (Mo/Yr)End \$Name and Title of Last SupervisorEmployed From (Mo/Yr)Pay Rate \$Your Title or PositionTo (Mo/Yr)End \$Name and Title of Last SupervisorTo (Mo/Yr)End \$Name and Title of Last SupervisorTo (Mo/Yr)EndName and Title of Last Supervisor

Please explain fully any gaps in your employment history _____

Have you ever been terminated or asked to resign from any job? [] Yes [] No

If Yes, please explain circumstances

Please indicate any previous experience in an automotive dealership including dates, position(s) held, and job duties

[] Office

[] Sales/Leasing

[] Service & Repair _____

- [] Parts ______
- [] Other ______

EDUCATION AND TRAINING

School Name	Years Completed	Diploma/Degree	Describe Course of Study or Major	Describe Specialized Training, Experience, Skills, Etc.	
High School	9 10 11 12				
College/University	1 2 3 4				
Graduate/Professional	1 2 3 4				
Trade or Technical School					

Please list any other specialized courses completed, certifications, designations, etc. that you have earned _____

Please indicate experience and proficiency with the following software applications:

[] Word [] Excel [] Reynolds & Reynolds [] ADP [] DMS [] Other: ______

PERSONAL REFERENCES

Name	Occupation	Number of Years Known	Telephone and/or Email

DRIVING INFORMATION

Do you have a current driver license?	[] Yes	[]No	State
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Has vo	ur driver	license been	suspended of	or revoked ir	າ the last f	five (5) years?	[]Yes	[] No
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If Yes, please explain circumstances ______

Have you been cited for driving under the influence (DUI) or driving while intoxicated (DWI) in the last 5 years?

[] Yes [] No If Yes, please explain circumstances and outcome _____

Please list all moving vi	olations in the last	five (5) years			
			Offense	Date	Location
Offense	Date	Location	Offense	Date	Location

CRIMINAL INFORMATION

Have you ever been convicted or entered a plea or	f no conte	est for any crime (except for minor traffic violations) or do
you have a criminal charge pending against you?	[]Yes	[] No

If Yes, please give date and details of each ______

*PLEASE NOTE: A criminal conviction will not be an automatic bar to employment. Factors such as the type and seriousness of the crime, the frequency of the violations, the amount of time that has elapsed since the crime was committed, your entire work and education history, the nature of the job sought, and any other related factors will be taken into consideration.

APPLICANT STATEMENT

This application will be considered active for a maximum of thirty (30) days. I understand that if I wish to be considered for employment after that time, I will need to reapply.

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages; and that I have the right to terminate my employment at any time with or without notice, and the company has the same right.

I understand that Sunset Automotive Group is a Drug Free Workplace and if given a conditional offer of employment, I will submit to and pass a drug test prior to the offer of employment becoming final.

I understand that the Sunset Automotive Group and/or its contractors may contact my previous employers and I authorize those employers to disclose to Sunset Automotive Group all records and other information pertinent to my employment with them. I also authorize Sunset Automotive Group to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold all parties harmless for providing such information.

I certify that all of the information that I have provided on this application is true and accurate. I understand that if I am employed and any such information is later found to be false or misleading in any respect, I may be dismissed.

I understand that by signing below, I am certifying that the information on this application is true and correct and that I agree to the terms of the application process. I understand that if I do not wish to accept the above terms, I should not sign below. I further understand that if I do not sign below, I will not be considered for employment with Sunset Automotive Group.

Signature:

Date:

APPLICANTS HAVE RIGHTS UNDER FEDERAL EMPLOYMENT LAWS

Equal Employment Opportunity (EEO): Federal law protects applicants and employees from discrimination in hiring, promotion, discharge, pay, fringe benefits, job training, classification, referral, and other aspects of employment, on the basis of race, color, religion, sex (including pregnancy), national origin, disability, age, or genetic information.

Employee Polygraph Protection Act (EPPA): This act prohibits most private employers from using lie detector tests either for preemployment screening or during the course of employment.

Family Medical Leave Act (FMLA): FMLA requires covered employers to provide up to 12 weeks of unpaid, job-protected leave to eligible employees for the following reasons:

- for incapacity due to pregnancy, prenatal medical care or childbirth;
- to care for the employee's child after birth, or placement for adoption or foster care;
- to care for the employee's spouse, son, daughter or parent, who has a serious health condition; or
- for a serious health condition that makes the employee unable to perform the employee's job.

Eligible employees whose spouse, son, daughter or parent is on covered active duty or call to covered active duty status may use their 12-week leave entitlement to address certain qualifying exigencies.

Notice: For more information or to see the full explanation of your rights under any of these laws, please ask to see the employment notice posters at the facility where you are completing your application, see the electronic version of these posters at www.sunsetautogroup.com, and/or visit www.dol.gov.