



38 Deforest Avenue
East Hanover, NJ 07936
Phone# 973-428-4747 Fax# 973-386-0753

Application

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Name:		
Date of birth:	SSN:	Phone:
Current address:		
City:	State:	ZIP Code:
Previous address:		
City:	State:	ZIP Code:
Owned	Rented (Please circle)	How long?

Employment Information

Current employer:		Still employed -- Y <input type="checkbox"/> N <input type="checkbox"/>
Employer address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:

Previous employer:		
Employer address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:

Previous employer:		
Employer address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:

Previous employer:		
Employer address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:

Do you have any pre-existing medical conditions that may or may not prevent you from doing the position that you are hired for? Yes ☐ No ☐

If so please explain _____



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Education Information

	School Name, City, and State	Course of Study/Major	Graduated	Degree Received
High School			Yes [] No []	
College			Yes [] No []	
Other			Yes [] No []	

Circle your present year in school: High School 3 4 College 1 2 3 4 Graduate 1 2 3

References		
Name:	Address:	Phone:

Statement of Purpose

I certify that my application and all attachments are true and complete to the best of my knowledge. I understand that incorrect, incomplete, or false statements or information furnished by me may, at the discretion of C & L Auto Body, disqualify me from employment, or cause my dismissal. I hereby authorize C & L Auto Body to make a thorough investigation of my employment and activities. I release from liability C & L Auto Body, former employers, or any persons supplying such information. The language in this application is not intended to create, nor is it to be misconstrued to constitute, a contract of employment.

Signature of applicant:	Date:
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PERSONAL INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE # _____

CELL PHONE # _____

OTHER PHONE # _____

SOCIAL SECURITY# _____

DRIVER LICENSE # - STATE _____ # _____

DATE OF BIRTH: _____

E-MAIL ADDRESS: _____

CITIZENSHIP STATUS: CITIZEN _____ NOT A CITIZEN _____

EMERGENCY CONTACT INFORMATION

EMERGENCY CONTACT NAME: _____

RELATIONSHIP: _____

PHONE # _____

Signature _____