

## Agile Automotive Performance Job Application – Office Position

Date: \_\_\_\_\_

### Personal Information:

Name (first and last): \_\_\_\_\_

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

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

E-Mail: \_\_\_\_\_

### Employment Desired:

Desired Position: \_\_\_\_\_

Date You Can Start: \_\_\_\_\_

Desired Pay: \_\_\_\_\_

Are You Employed? \_\_\_\_\_ yes \_\_\_\_\_ no

If so, may we inquire of your present employer? \_\_\_\_\_ yes \_\_\_\_\_ no

### Education:

High School: \_\_\_\_\_

Years Attended: \_\_\_\_\_

Did you graduate? \_\_\_\_\_ yes \_\_\_\_\_ no

Area of Study: \_\_\_\_\_

Trade School: \_\_\_\_\_

Years Attended: \_\_\_\_\_

Did you graduate? \_\_\_\_\_ yes \_\_\_\_\_ no

Area of Study: \_\_\_\_\_

College: \_\_\_\_\_

Years Attended: \_\_\_\_\_

Did you graduate? \_\_\_\_\_ yes \_\_\_\_\_ no

Major: \_\_\_\_\_

### Former Employment:

Employer: \_\_\_\_\_

Worked from (month/year) \_\_\_\_\_ to (month/year) \_\_\_\_\_

Wage/Salary: \_\_\_\_\_

Position: \_\_\_\_\_

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

Reason For Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Worked from (month/year) \_\_\_\_\_ to (month/year) \_\_\_\_\_

Wage/Salary: \_\_\_\_\_

Position: \_\_\_\_\_

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

Reason For Leaving: \_\_\_\_\_

**Legal Status:**

Are you a citizen of the United States? \_\_\_\_\_ yes \_\_\_\_\_ no

Have you been arrested? \_\_\_\_\_ yes \_\_\_\_\_ no

Have you been charged of a criminal offense? \_\_\_\_\_ yes \_\_\_\_\_ no

Have you been convicted of anything greater than a misdemeanor? \_\_\_\_\_ yes \_\_\_\_\_ no

What do you think is your strongest area or skill?

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What is your biggest weakness?

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What project have you done that you were the most proud of (automotive or marketing related)?

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What makes/models of cars do you have the most experience with and the most knowledge of?

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What is your favorite kind of project to work on and why?

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**Knowledge Rating:**

Be honest. A high rating is not always the best. We'd rather know the truth now than find out you exaggerated later.

Please rate your experience/ability with and knowledge of the following:

	Strong/ Very Knowledgeable				Weak/ No Experience
Overall Mechanical Knowledge	5	4	3	2	1
Brakes	5	4	3	2	1
Turbo/supercharger system	5	4	3	2	1
Suspension	5	4	3	2	1
Suspension tuning	5	4	3	2	1
Engine internals	5	4	3	2	1
Cooling	5	4	3	2	1
Factory Service	5	4	3	2	1
Clutches	5	4	3	2	1
Transmission internals	5	4	3	2	1
Exhaust	5	4	3	2	1
Fuel system	5	4	3	2	1
Troubleshooting	5	4	3	2	1
Overall Electrical Knowledge	5	4	3	2	1
Gauges	5	4	3	2	1
ECUs	5	4	3	2	1
Boost Controllers	5	4	3	2	1
Turbo timers	5	4	3	2	1
Meth injection	5	4	3	2	1
Overall Marketing Experience	5	4	3	2	1
Event Planning	5	4	3	2	1
Creating Ad Campaign	5	4	3	2	1
Implementing Ad Campaign	5	4	3	2	1
Posting On Car Forums	5	4	3	2	1
Navigating Car Forums	5	4	3	2	1
Overall Software Experience	5	4	3	2	1
Quickbooks	5	4	3	2	1
Outlook Email	5	4	3	2	1
Microsoft Word	5	4	3	2	1
Windows OS	5	4	3	2	1
Graphics Editing Software (e.g. Adobe Photoshop)	5	4	3	2	1
Video Editing Software (e.g. Adobe Premiere)	5	4	3	2	1
Overall Work ethic	5	4	3	2	1
Works well alone	5	4	3	2	1
Works well in a team	5	4	3	2	1
Organization	5	4	3	2	1
Customer relations	5	4	3	2	1
Phone etiquette	5	4	3	2	1
Paperwork completion	5	4	3	2	1
Attention to detail	5	4	3	2	1
Completes work quickly	5	4	3	2	1
Completes work thoroughly	5	4	3	2	1
Takes pride in work	5	4	3	2	1
Timeliness	5	4	3	2	1

**References:**

Please give us the names of two people, not related to you, whom you have known at least one year through school, work, or in a professional setting:

Name: \_\_\_\_\_  
How do you know them? \_\_\_\_\_  
Years Known: \_\_\_\_\_  
Phone/Email/Contact Info: \_\_\_\_\_

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Years Known: \_\_\_\_\_  
Phone/Email/Contact Info: \_\_\_\_\_

“I certify that the facts contained in this application are true and complete to the best of my knowledge and understate that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.”

Signature: \_\_\_\_\_

Date: \_\_\_\_\_