



# EMPLOYMENT APPLICATION

I-CAR® is an equal opportunity employer. We recruit, hire, train, compensate, promote and provide other conditions of employment without regard to any person's race, color, religion, age, gender, disability, marital or veteran status, place of national origin, or other characteristics protected by law.

## PERSONAL DATA (PLEASE PRINT)

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Last Name                                      First Name                                      Middle

\_\_\_\_\_  
Street Address                                      City                                      State                                      ZIP Code

\_\_\_\_\_  
County                                      E-mail Address

(      )                                      (      )                                      \_\_\_\_\_  
Phone (Home)                                      Phone (Cell)                                      Social Security Number

*For your security, write in your SSN **AFTER** you have received an offer of employment.*

Are you over 18 years old?  Yes  No

Are you legally authorized to work in the U.S.?  Yes  No

*(Any offer of employment is conditioned upon your completing Form I-9 and providing documents establishing identity and authorization to work in the United States.)*

## JOB INTEREST

Position desired \_\_\_\_\_ Wage expected \$ \_\_\_\_\_

Date available for employment \_\_\_\_\_  Full-time  Part-time  Full- or Part-time

If the job required it, are you able to travel on company business?  Yes  No

% time willing to travel \_\_\_\_\_ How did you hear about this opening? \_\_\_\_\_

Briefly state why you'd like to work at I-CAR \_\_\_\_\_

\_\_\_\_\_

## EDUCATION AND TRAINING

FULL SCHOOL NAME	CITY	STATE	MAJOR/DEGREE	DID YOU GRADUATE?	GPA
_____ High School	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____ Trade/Tech School	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____ College	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____ Graduate School	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

## EMPLOYMENT HISTORY

List all employment starting with the present or most recent employer. If you are/were self-employed, list firm name. If you need more space, add a separate page.

Current Employer

If this is your current place of employment, may we contact the employer?  Yes  No

Previous Employer

\_\_\_\_\_  
Company Name/Employer ( )  
Phone \_\_\_\_\_  
\_\_\_\_\_  
Street Address City State Zip Code  
\_\_\_\_\_  
Your Job Title Employed from \_\_\_\_\_ to \_\_\_\_\_  
(Month/Year) (Month/Year)

\_\_\_\_\_  
Supervisor/Manager's Name and Title

Describe major duties \_\_\_\_\_  
\_\_\_\_\_

Reasons for leaving \_\_\_\_\_

Do any of the following Terms and Conditions apply with your current employer?  
If so, please attach all appropriate documents/policies.

Non-compete Agreement  Non-disclosure Agreement  No Secondary Employment Agreement

\_\_\_\_\_  
Company Name / Employer ( )  
Phone \_\_\_\_\_  
\_\_\_\_\_  
Street Address City State ZIP Code  
\_\_\_\_\_  
Your Job Title Employed from \_\_\_\_\_ to \_\_\_\_\_  
(Month/Year) (Month/Year)

\_\_\_\_\_  
Supervisor/Manager's Name and Title

Describe major duties \_\_\_\_\_  
\_\_\_\_\_

Reason for leaving \_\_\_\_\_

## EMPLOYMENT HISTORY (CONT'D)

\_\_\_\_\_  
Company Name / Employer ( )  
Phone

\_\_\_\_\_  
Street Address City State ZIP Code

\_\_\_\_\_  
Your Job Title Employed from (Month/Year) to (Month/Year)

\_\_\_\_\_  
Supervisor/Manager's Name and Title

\_\_\_\_\_  
Describe major duties

\_\_\_\_\_  
Reason for leaving

\_\_\_\_\_  
Company Name / Employer ( )  
Phone

\_\_\_\_\_  
Street Address City State ZIP Code

\_\_\_\_\_  
Your Job Title Employed from (Month/Year) to (Month/Year)

\_\_\_\_\_  
Supervisor/Manager's Name and Title

\_\_\_\_\_  
Describe major duties

\_\_\_\_\_  
Reason for leaving

## ADDITIONAL INFORMATION

Please list any other job-related accomplishments, certifications, professional distinctions or training attended.

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

Please list two references, other than relatives or previous employers.

\_\_\_\_\_  
Name Position

\_\_\_\_\_  
Company Location ( )  
Phone

\_\_\_\_\_  
Name Position

\_\_\_\_\_  
Company Location ( )  
Phone

***Please read this carefully before signing:***

I hereby authorize I-CAR® to thoroughly investigate my references, either independently or through an accredited third party vendor. References will include, but not be limited to: work records, education, current and /or former salary, and other matters related to my suitability for employment. I further authorize my current and former employers to disclose to I-CAR any and all other factual information relating to the performance of my duties with said employer(s) without giving me prior notice of such disclosure. In addition, I hereby release I-CAR, my current and former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation.

**I understand that acceptance of this application does not create an employment relationship with I-CAR, either expressed or implied. I understand that nothing conveyed to me during any interview with any employees and/or agents of I-CAR constitutes an employment contract between I-CAR and me. I acknowledge and agree that if I am employed, my employment relationship with I-CAR is strictly voluntary and at our mutual will. I understand that if employed, my employment is for no definite period of time and may be terminated either by me or by I-CAR at any time, with or without prior notice and with or without cause or reason. I agree that no promises or representations contrary to the foregoing are binding on I-CAR unless made in writing and signed jointly by the President and Chief Executive Officer of I-CAR and me.**

I understand and agree that any future changes in my title, duties, compensation, working conditions, and/or I-CAR benefits (if any), policies and procedures will not alter our at-will agreement.

I hereby certify that I have not knowingly withheld or falsified any information that might adversely affect my chances for employment, and that answers and information provided, both on this employment application and any accompanying documents, such as my resume, are true and correct to the best of my knowledge and belief. I understand and agree that any omission or misstatement on this employment application or on any documents used to secure employment shall be grounds for rejection of this application, or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

My signature below acknowledges that I have read and understand this complete page, and I agree to the terms and conditions outlined in this entire employment application.

\_\_\_\_\_  
Applicant's Name *(please print)*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Applications for I-CAR or the Collision Repair Education Foundation can be faxed to 847.463.5429, emailed to [jobs@i-car.com](mailto:jobs@i-car.com) or mailed to:

**I-CAR • 5125 Trillium Blvd. • Hoffman Estates, IL 60192 • Attn: Human Resource Services**



# INVITATION TO SELF-IDENTIFY FOR EEO PURPOSES

Thank you for your interest in employment at I-CAR®, an equal opportunity employer. I-CAR does not discriminate in hiring or employment on the basis of race, color, religion, sex, national origin, age disability, or any other basis prohibited by federal, state, or local law. No question on this form is intended to secure information to be used for such discrimination.

I-CAR is required by federal regulations to report information as requested below. Please help us fulfill our obligations as an equal opportunity employer by completing this form. Your contribution of this information is completely voluntary and will be used only in accordance with applicable federal and state laws. Please be assured that you choose to provide this information, it will in no way affect any decision regarding your employment opportunity. The information you provide is strictly confidential and will be maintained separate from your application form, as required by law.

Applicant Name : \_\_\_\_\_ Date: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

### PLEASE CHECK GENDER:

- Male
- Female

### PLEASE INDICATE THE APPROPRIATE RACE/ETHNIC GROUP:

- Hispanic or Latino** (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)
- White-Not Hispanic or Latino** (A person having origins in any of the original peoples of the United States, Canada, Europe, the Middle East, or North Africa)
- Black or African American-Not Hispanic or Latino** (A person having origins in any of the black racial groups of Africa)
- Asian-Not Hispanic or Latino** (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam)
- Native Hawaiian or Other Pacific Islander-Not Hispanic or Latino** (A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands)
- American Indian or Alaska Native-Not Hispanic or Latino** (A person having origins in any of the original peoples of North and South America [including Central America], and who maintain tribal affiliation or community attachment)
- Two or More Races-Not Hispanic or Latino** (All persons who identify with more than one of the above races, excluding those who identify themselves as Hispanic or Latino)

### HOW WERE YOU REFERRED TO THIS JOB?

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> School/College    | <input type="checkbox"/> Walk-In           | <input type="checkbox"/> Employee Referral |
| <input type="checkbox"/> Search Firm       | <input type="checkbox"/> Advertisement     | _____ (Name of Employee)                   |
| <input type="checkbox"/> State Job Service | <input type="checkbox"/> Government Agency | <input type="checkbox"/> Other             |