



COASTAL EXPRESS CAR WASH JOB APPLICATION

NOTICE:

1. You must answer all questions and complete all sections of this application. Please put N/A in sections that are not applicable.
2. Coastal Express Car Wash is an equal employment opportunity employer.

PERSONAL INFORMATION

Last Name: _____ First Name: _____ MI: _____ Phone # _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Are you a citizen of the United States? YES NO If NO, are you authorized to work in the U.S.? YES NO

Desired Wage: _____ Are you at least 16 years old? YES NO Do you have reliable transportation? YES NO

Date available to start working? _____ Have you ever worked for Coastal Express Car Wash? YES NO

AVAILABILITY: Part Time _____ Full Time _____ Preferred amount of hours per week? _____

Hours Available	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
From:							
To:							

CRIMINAL HISTORY: Please note, answering yes to the questions below does not automatically disqualify you for employment.

Have you ever been convicted of, or plead guilty or no contest to any crime (Felony or Misdemeanor)? YES NO

If yes, give dates and details: _____

EDUCATION

High School Education (Circle Highest Grade Completed): 9 10 11 12 GED

College Education (Circle Years Completed): 1 2 3 4 Graduate School (Circle Years Completed): 1 2 3 4

School Information	Name & Location	Graduated?
High School		YES NO
College or Vocational School		YES NO

WORK HISTORY

CURRENT OR LAST EMPLOYER: _____ Full Address: _____

Job Title: _____ Supervisors Name: _____ Telephone # _____

Dates Employed _____ Starting Salary _____ Reason for Leaving _____

EMPLOYER: _____ Full Address: _____

Job Title: _____ Supervisors Name: _____ Telephone # _____

Dates Employed _____ Starting Salary _____ Reason for Leaving _____

EMPLOYER: _____ Full Address: _____

Job Title: _____ Supervisors Name: _____ Telephone # _____

Dates Employed _____ Starting Salary _____ Reason for Leaving _____

MILITARY SERVICE

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

REFERENCES

List three personal references not related to you and not employed by Coastal Express Car Wash.

Name: _____ Relationship: _____ Phone #: _____

Email Address: _____

Name: _____ Relationship: _____ Phone #: _____

Email Address: _____

Name: _____ Relationship: _____ Phone #: _____

Email Address: _____

DISCLAIMER AND SIGNATURE

A job at Coastal Express Car Wash involves work that is:

- 1. Demanding in all types of weather conditions
- 2. Flexible in Hours
- 3. Routine & Professional the Coastal Express Car Wash way...
- 4. Challenging in providing excellent customer service to everyone.

As an employee of Coastal Express Car Wash what is expected of you:

- 1. A personal appearance and image that is neat, clean, and meets uniform standards.
- 2. A pleasant manner (smiling & polite) in providing great service for our customers.
- 3. A sense of urgency in completing daily tasks with safety a top priority
- 4. A willingness to meet the demands and requirements of the job.

Do you understand that compliance with Coastal Express Car Wash uniform and appearance policy is condition of employment? YES_____ NO_____

I understand that if I am hired, my employment will be for no definite period of time. I further understand that I may terminate at any time and Coastal Express Car Wash also has the right to do so at any time.

Applicant Initials_____

I authorize Coastal Express Car Wash to investigate my background. This inquiry would include information on my character and reputation. I further understand that Coastal Express Car Wash may contact my former employer (s) and I authorize those employers to disclose all records of my employment with them.

Applicant Initials_____

I certify that all information I have provided in this application is true and correct to the best of my knowledge. I understand that should I be hired and the information provided is found to be false or misleading. I will be immediately discharged/terminated.

Applicant Initials_____

APPLICANT SIGNATURE:_____ DATE:_____

PLEASE NOTE: Applications will remain on file for 30 days.