

## **AUTO BODY SPECIALTIES**

P.O. BOX 84925 SIOUX FALLS, SD 57118

Employment Application Email to: abs.corp.office@absdelivers.com

Fax: 605-336-7641

		Applicant Ir	ntormation									
Full Name:					Date:							
Address:	Last	First										
Addicss.	Street Address			Apartment	/Unit #							
	City			State	ZIP Code							
Phone: (	)	E-mai	il Address: _									
Date Availab	ole:			Desired Salary:	\$							
Position App	lied for:											
Are you auth	norized to work in the U.S.?	YES NO										
Have you ev	er worked for this company?	YES NO	yes, when?									
Education												
High School: Address:												
From:	To:	Did you graduate?	YES NO	Degree:								
College:		Address:										
From:	To:	Did you graduate?	YES NO	Degree:								
Other:		Address:	V50 N0									
From:	To:	Did you graduate?	YES NO	Degree:								
		Refere	ences									
Please list ti	hree professional references	S.										
Full Name:		R	Relationship: _									
Company:				Phone: (	_)							
Address: _												
Full Name:		R	Relationship: _									
Company:			Phone: (	`								
Address: _				-								
, wai 033												
Full Name:		R	Relationship: _									
Company:				Phone: (	_)							
Address: _												

		Previous Emplo	oymer	nt		
Company:				Phone:	( )	
Address:				Supervisor:		
Job Title:		_ Starting Salary	: \$_		Ending Salary:	\$
Responsibilities:						
From:	To:	Reason for Leaving				
May we contact your prev	vious supervisor for	a reference?		NO		
Company:				Phone:	( )	
Address:				_ Supervisor:		
Job Title:		_ Starting Salary	: \$_		Ending Salary:	\$
Responsibilities:						
From:	To:	Reason for Leaving	: <u></u>			
May we contact your prev	vious supervisor for	a reference?	3	NO		
Company:				Phone:	()	
Address:				Supervisor:		
Job Title:		_ Starting Salary	: \$_		Ending Salary:	\$
Responsibilities:						
From:	To:	Reason for Leaving	:			
May we contact your prev	vious supervisor for	a reference?	3	NO		
		Disclaimer and S	ignat	ure		
I certify that my answers	s are true and comr	plete to the best of my	r know	rledae.		
If this application leads in may result in my release	to employment, I ur	-			on in my applica	tion or interview
Signature:					Date:	