

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip Code

Telephone # ( ) \_\_\_\_\_ Mobile/Other Phone # \_\_\_\_\_ Email \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ Date of application \_\_\_\_\_

May we contact you at work?  Yes  No If yes, work number and best time to call \_\_\_\_\_

Are you legally eligible for employment in this country?  Yes  No

Date available to work \_\_\_\_\_ Will you travel if job requires it? \_\_\_\_\_

Driver's license number required if driving may be required in the job for which you are applying:

DL # \_\_\_\_\_ State \_\_\_\_\_

Birthdate: \_\_\_\_\_  
month day year

Have you ever been bonded?  Yes  No

*Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.*

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime?  Yes  No

If yes, please provide date(s) and details \_\_\_\_\_  
\_\_\_\_\_

What is your desired salary range or hourly rate of pay? \$ \_\_\_\_\_ Per \_\_\_\_\_

Type of employment desired  Full-Time  Part-Time

**EMPLOYMENT HISTORY**

Starting with your most recent employer, provide the following information.

Employer	Telephone # ( )	Dates employed (month/year) / to /	
Street address	City	State	<b>Compensation (Starting)</b> <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Starting job title / final job title			Commission/Bonus/ Other Compensation \$
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	<b>Compensation (Final)</b> <input type="checkbox"/> Hourly <input type="checkbox"/> Salary	\$ per
Why did you leave?			Commission/Bonus/ Other Compensation \$

Summarize the type of work performed and job responsibilities.

What did you like most about your position?

What were the things you liked least about the position?

Employer	Telephone # ( )	Dates employed (month/year) / to /	
Street address	City	State	<b>Compensation (Starting)</b> <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Starting job title / final job title			Commission/Bonus/ Other Compensation \$
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	<b>Compensation (Final)</b> <input type="checkbox"/> Hourly <input type="checkbox"/> Salary	\$ per
Why did you leave?			Commission/Bonus/ Other Compensation \$

Summarize the type of work performed and job responsibilities.

What did you like most about your position?

What were the things you liked least about the position?

Employer	Telephone # ( )	Dates employed (month/year) / to /	
Street address	City	State	<b>Compensation (Starting)</b> <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Starting job title / final job title			Commission/Bonus/ Other Compensation \$
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	<b>Compensation (Final)</b> <input type="checkbox"/> Hourly <input type="checkbox"/> Salary	\$ per
Why did you leave?			Commission/Bonus/ Other Compensation \$

Summarize the type of work performed and job responsibilities.

What did you like most about your position?

What were the things you liked least about the position?

**EMPLOYMENT HISTORY** (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability. \_\_\_\_\_

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 If not addressed on previous page, have you ever been fired or asked to resign from a job?  Yes  No

If yes, please explain \_\_\_\_\_

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**SKILLS AND QUALIFICATIONS**

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

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Computer Skills (check appropriate boxes. Include software titles and years of experience)

<input type="checkbox"/> Word Processing _____ Years: _____	<input type="checkbox"/> Internet _____ Years: _____
<input type="checkbox"/> Spreadsheet _____ Years: _____	<input type="checkbox"/> Other _____ Years: _____
<input type="checkbox"/> Presentation _____ Years: _____	<input type="checkbox"/> Other _____ Years: _____
<input type="checkbox"/> E-mail _____ Years: _____	<input type="checkbox"/> Other _____ Years: _____

**EDUCATIONAL BACKGROUND**

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		

**REFERENCES**

 List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship to You	Telephone	Number of Years Known
			( )	
			( )	
			( )	

**RELATED INFORMATION**

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

Organization	Offices Held

List special accomplishments, publications, awards, etc.

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

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In your current or prior job, have you ever written instructions or directions to be followed by employees or customers?

Yes     No     Not Applicable

If yes, please explain: \_\_\_\_\_

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Is there any other job-related information you want us to know about you? \_\_\_\_\_

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**APPLICANT STATEMENT**

I certify that all information I have provided in order to apply for and secure work with Mechanical Reps Inc. is true, complete and correct. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contract and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employers, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that Mechanical Reps Inc. does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notices, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**MECHANICAL REPS, INC.**  
**BACKGROUND CHECK**  
**DISCLOSURE AND AUTHORIZATION**

**Disclosure**

A consumer report is a type of background check in which information (which may include, but is not limited to, criminal background, driving background, character, general reputation, personal characteristics, and mode of living) about you is gathered and communicated by a consumer reporting agency ("CRA") to Mechanical Reps Inc., and/or its subsidiaries, affiliates, other related entities, successors, and/or assigns (the "Company").

An investigative consumer report is a special type of consumer report in which information (as described above) about you may be obtained by personal (including telephonic) interviews with neighbors, friends, associates, acquaintances, or others. You have a right to request from Company [Mechanical Reps, Inc. 3901 Woodbury Dr., P.O. Box 41869, Austin, TX 78704 (512) 444-1835, (512) 444-5522 (fax)] disclosures of the nature and scope of an investigative consumer report and a summary of your rights under the federal Fair Credit Reporting Act. Your request should be made in writing to Company within a reasonable period of time after your receipt of this Background Check Disclosure and Authorization. For your convenience, included is "A Summary of Your Rights under the Fair Credit Reporting Act" form.

Company may obtain either a consumer report or an investigative consumer report on you to be used for employment purposes, including your application for employment. Except as otherwise prohibited by state law, Company may share this information with Company's current or prospective clients, customers, and/or their agents (including but not limited to vendor credentialing companies) for business reasons (e.g., to place you in certain employment positions, jobs, work sites, etc.). Except as otherwise prohibited by state law, your authorization remains in effect during employment, should you become employed by Company. Notwithstanding anything else in this document, Company reserves the ability to avail itself of any rights under any applicable federal, state, or local law, including the federal Fair Credit Reporting Act, as amended.

**Authorization**

(Please Print)

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

List any other names used (nickname, maiden/married last names): \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth\*\* \_\_\_\_\_ Sex\*\* M  F

\*\* This information will be used for identification purposes only and will not be used as hiring criteria.

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Driver's License # \_\_\_\_\_ State Issued \_\_\_\_\_

In chronological order (earliest to latest), list all additional cities/states and zip codes in which you have resided during the last seven (7) years.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

To the extent permitted by applicable state law, I hereby consent to this investigation and authorize Company to procure consumer report(s), criminal background check(s), and/or investigative consumer report(s), on my background from a consumer reporting agency ("CRA") or from an investigative consumer reporting agency ("ICRA"), as described in the Disclosure section. I have reviewed and understand the information, statements, and notices in this Background Check Disclosure and Authorization form, including the State Law Notices. My authorization remains valid throughout my employment with the Company such that, to the extent permitted by applicable law, I agree Company can procure additional consumer report(s) and/or investigative consumer report(s) during my employment without providing additional disclosures or obtaining additional authorizations.

In order to verify my identity for the purposes of background identification, and for my own benefit, I am voluntarily releasing my date of birth and other information. I understand that date of birth and gender/sex information will be used for background check purposes only and that all employment decisions are based on non-discriminatory reasons.

**For California, Minnesota, or Oklahoma applicants/employees only:** If you would like to receive from the CRA or ICRA a copy of the background check report that Company may procure in connection with your application for employment, please check this box.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Para información en español, visite [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

### A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

**You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

**You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- o a person has taken adverse action against you because of information in your credit report;
- o you are the victim of identity theft and place a fraud alert in your file;
- o your file contains inaccurate information as a result of fraud;
- o you are on public assistance;
- o you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for additional information.

**You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:**

**You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for an explanation of dispute procedures.

**Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

**Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

**Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

**You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

**You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPT-OUT (1-888-567-8688).

**You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

**Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau; 1700 G Street, N.W.; Washington, DC 20552 b. Federal Trade Commission: Consumer Response Center – FCRA; Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency; Customer Assistance Group 1301 McKinney Street, Suite 3450; Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center; P.O. Box. 1200; Minneapolis, MN 55480 c. FDIC Consumer Response Center; 1100 Walnut Street, Box #11; Kansas City, MO 64106 d. National Credit Union Administration; Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO); 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings; Aviation Consumer Protection Division; Department of Transportation; 1200 New Jersey Avenue, S.E.; Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board; Department of Transportation; 395 E Street, S.W.; Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access; United States Small Business Administration 409 Third Street, SW, 8 <sup>th</sup> Floor; Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission; 100 F Street, N.E.; Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration; 1501 Farm Credit Drive; McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center – FCRA; Washington, DC 20580; (877) 382-4357