

# Central Virginia Rental

Main Office: 2482 Jefferson Hwy., Waynesboro, VA 22980 (540) 943-8173

2482 Jefferson Hwy. (540) 943-6800	708 Richmond Ave. Staunton, VA 24401 (540) 886-7500	3380 Emmaus Rd. Harrisonburg, VA 22801 (540) 433-7368	1141 River Rd. (434) 977-5915	101 Memorial Ln. Lexington, VA 24450 (540) 464-4287
2075 West Main Street (540) 932-7368 Waynesboro, VA 22980			1140 River Rd. (434) 977-7368 Charlottesville, VA 22901	

## EMPLOYMENT APPLICATION

Position/s Applied For: \_\_\_\_\_ Date \_\_\_\_\_

Last Name		First Name		Middle Name	
Street Address		City		State Zip	
Telephone Number/s				Drivers License Number	

If you are less than 18 years of age, can you provide required proof of your eligibility to work? YES \_\_\_\_\_ NO \_\_\_\_\_

Have you ever filed an application with us before? If YES, give date: \_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_

Have you ever been employed with us before? If YES, give date: \_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_

Are you currently employed YES \_\_\_\_\_ NO \_\_\_\_\_ If YES, may we contact your employer? YES \_\_\_\_\_ NO \_\_\_\_\_

Are you prevented from lawfully becoming employed in the USA because of Visa or Immigration status? YES \_\_\_\_\_ NO \_\_\_\_\_ *(Proof of citizenship or immigration status will be required before employment)*

On what date will you be available for work? \_\_\_\_\_

Are you currently on "layoff" Status, and subject to recall? YES \_\_\_\_\_ NO \_\_\_\_\_

Are you available to work: (check all that apply) FULL-TIME? \_\_\_\_ PART-TIME? \_\_\_\_ SHIFT WORK? \_\_\_\_ TEMPORARY? \_\_\_\_

## EDUCATION

	NAME / LOCATION	YEARS COMPLETED	COURSE OF STUDY OR SPECIALIZED TRAINING
Elementary / Middle School		4 5 6 7 8	
High School		9 10 11 12	
Under Graduate		1 2 3 4	
Graduate		1 2 3 4	

**EMPLOYMENT EXPERIENCE** Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude those, which indicate race, color, religion, gender, national origin or handicap. (attach resume' if available)

Employer	Dates Employed From: _____ To: _____	List Work Performed	
Address			
Phone Number/s	Hourly Rate or Salary →	Starting	Ending
Job Title	Supervisor		
Reason for Leaving			

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Please summarize any special job-related skills and/or qualifications (list on separate sheet if necessary)