



AUTO PARTS PROS, LLC

Application for Employment

Please print or type information. You can submit online, or bring to one of our NAPA locations listed on our website.

APPLICANT INFORMATION											
Last Name				First			M.I.	<input type="checkbox"/>	Date		
Street Address							Apartment/Unit #				
City				State			ZIP				
Phone				E-mail Address							
Date Available											
Position Applied for											
If hired, can you furnish proof of age?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>							
Are you a citizen of the United States?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>		
Are you licensed to drive a car?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Is it valid in California?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>		
Have you ever been employed by NAPA, GPC or AutoPartsPros?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If so, when						
										Position	
Do you have a relative employed by NAPA, GPC or AutoPartsPros?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If so, name						
EDUCATION											
High School				Address							
From	To	Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree				
College				Address							
From	To	Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree				
Other				Address							
From	To	Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree				
MILITARY SERVICE											
Branch						From	To				
Rank at Discharge						Type of Discharge					
If other than honorable, explain											
PREVIOUS EMPLOYMENT											
Company						Phone	()				
Address						Supervisor	Matt Herr				
Job Title				Wages Per Hr \$			Wages Per Week \$			Annual Salary \$	
Responsibilities											
From	To	Reason for Leaving									
May we contact your previous supervisor for a reference?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>							
Company						Phone	()				

Click the Grey Button to Submit your application by email. You may also print and hand deliver to one of our NAPA stores.

Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
POSITION / TYPE OF WORK APPLYING FOR			
<i>I am interested in the type of work I have checked:</i>			
Management <input type="checkbox"/>		Outside/Commercial Account Sales <input type="checkbox"/>	
Counter/Retail Sales <input type="checkbox"/>		Stockroom/Warehouse <input type="checkbox"/>	
Office / Clerical <input type="checkbox"/>		Delivery Driver <input type="checkbox"/>	
I am available to work <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time		If part-time, indicate maximum hours per week	
Are there any hours or days during the week when you would not be available to work? YES <input type="checkbox"/> NO <input type="checkbox"/>			
If yes, please explain			
CONVICTIONS			
Have you been convicted of, or pled guilty to, a crime during the past seven years? You do not need to identify any conviction that has been legally sealed, expunged, pardoned or otherwise statutorily eradicated, and can respond to this question without reference to any such conviction. <input type="checkbox"/> YES <input type="checkbox"/> NO			
If yes, explain. A conviction will not disqualify you from employment, but will be considered only as it may relate to the job you are seeking.			
DISCLAIMER AND SIGNATURE			
<p><i>I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information is grounds for disqualification from any further consideration or for dismissal in accordance with Company policy. I authorize the references listed above to give you and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. In consideration of my employment, I agree to conform to the rules of the Company and my employment and compensation can be terminated with our without cause, and with or without note, at any time, at the option of either the Company or myself. I understand that no manager or representative of the Company has the authority to enter into any agreement for employment for any specified periods of time, or to make any agreement contrary to the foregoing. At-Will Employment: I also agree and understand that my employment is for an unspecified duration and constitutes "at-will" employment. The Company has and will continue to have the absolute and unconditional right to terminate my Employment for any reason or no reason, with or without cause or prior notice.</i></p> <p><i>In some states, the law requires that the Company have an applicant's written permission before obtaining consumer reports or police records on an individual, and I hereby authorize the Company to obtain such reports. I further understand and agree to submit to a pre-employment/post-offer SUBSTANCE ABUSE TEST. Failure to submit test sample at agreed time will disqualify me for employment.</i></p>			
Signature		Date	

SUBMIT

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