



EMPLOYMENT APPLICATION

Applicants are considered for all positions without regard to race, color, creed, religion, ancestry, age, sex, marital status, national origin, pregnancy, sexual orientation, disability or handicap, or veteran status.

APPLICATION MUST BE FULLY COMPLETED, SIGNED AND DATED.

| | |
|--------------------------|-----------|
| Position(s) Applied for: | Location: |
|--------------------------|-----------|

Can you perform the essential functions of the position(s) applied for with or without reasonable accommodation? If not, please explain: _____

Do you have a motorcycle endorsement? (Not a requirement) _____

| | |
|---------------------------|----------------------------|
| Last Name (please print): | First Name (please print): |
| Address (street): | Address (City, State Zip): |
| Telephone Number(s): | Social Security Number: |

EDUCATION

| | Name/Address of School | Years Completed | Course of Study | Diploma/Degree |
|-----------------------|------------------------|-----------------|-----------------|----------------|
| High School | | | | |
| Undergraduate College | | | | |
| Graduate Professional | | | | |
| Other (Specify) | | | | |

ADDITIONAL EMPLOYMENT INQUIRIES:

Have you ever been dismissed or forced to resign from employment? If yes, please explain: _____

PROFESSIONAL EXPERIENCE:

| | | | | |
|---------------------|--|---|-------|--|
| 1 | Employer: | Dates Employed | | Work Performed: |
| | | From | To | |
| | Address: | | | |
| | | Hourly Base Rate or Monthly Base Salary | | |
| | Phone Number: | | | |
| | Job Title: | Starting | Final | May we contact this employer to verify employment? |
| | Immediate Supervisor: | | | ___ YES ___ NO If not, why _____ |
| Reason for Leaving: | Does the pay listed above include overtime, bonuses, or benefits? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

| | | | | |
|---------------------|--|---|-------|--|
| 2 | Employer: | Dates Employed | | Work Performed: |
| | | From | To | |
| | Address: | | | |
| | | Hourly Base Rate or Monthly Base Salary | | |
| | Phone Number: | | | |
| | Job Title: | Starting | Final | May we contact this employer to verify employment? |
| | Immediate Supervisor: | | | ___ YES ___ NO If not, why _____ |
| Reason for Leaving: | Does the pay listed above include overtime, bonuses, or benefits? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

| | | | | |
|---------------------|--|---|-------|--|
| 3 | Employer: | Dates Employed | | Work Performed: |
| | | From | To | |
| | Address: | | | |
| | | Hourly Base Rate or Monthly Base Salary | | |
| | Phone Number: | | | |
| | Job Title: | Starting | Final | May we contact this employer to verify employment? |
| | Immediate Supervisor: | | | ___ YES ___ NO If not, why _____ |
| Reason for Leaving: | Does the pay listed above include overtime, bonuses, or benefits? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

| | | | | |
|---------------------|--|---|-------|--|
| 4 | Employer: | Dates Employed | | Work Performed: |
| | | From | To | |
| | Address: | | | |
| | | Hourly Base Rate or Monthly Base Salary | | |
| | Phone Number: | | | |
| | Job Title: | Starting | Final | May we contact this employer to verify employment? |
| | Immediate Supervisor: | | | ___ YES ___ NO If not, why _____ |
| Reason for Leaving: | Does the pay listed above include overtime, bonuses, or benefits? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

SKILLS

| | |
|----|--|
| 1. | |
| 2. | |
| 3. | |

PROFESSIONAL REFERENCES: Please list individuals that are NOT related to you. Business references preferred.

| | Name | Relationship | Contact Information |
|----|------|--------------|---------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

Are you at least 18 years of age?..... ☐ YES ☐ NO

If you are under 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

Are you currently employed?..... ☐ YES ☐ NO

On what date would you be available for work? _____

Are you currently on "lay-off" status and subject to recall?..... ☐ YES ☐ NO

Can you travel if the job requires it?..... ☐ YES ☐ NO

Are you available to work: ☐ Full-Time ☐ Part-Time ☐ Seasonal

What is your salary requirement? _____

Are any of your family members or relatives currently employed with us?..... ☐ YES ☐ NO

If so, who? _____

PERMISSION TO WORK

Are you legally authorized to work in the United States? ☐ YES ☐ NO

If hired can you present evidence of United States Citizenship or your legal right to work in the United States? ☐ YES ☐ NO

Will you now or in the future require sponsorship for employment? ☐ YES ☐ NO

ADDITIONAL QUESTIONS

Why are you interested in working for our company? _____

Why should we hire you? _____

What did you like about your previous positions? _____

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby release Walters Brothers Harley-Davidson from all liability, claims or lawsuits in regards to the information obtained from the reference sources used by Walters Brothers Harley-Davidson. This application shall be deemed active for a period of time not to exceed one year. Any applicant wishing to be considered should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Walters Brothers Harley-Davidson is on an "at will" basis, which means that the employee may resign at any time and the Employer may terminate the employment at any time with or without cause and with or without notice. It is further understood that this employment relationship may not be changed by any written document or by conduct unless an authorized executive of Walters Brothers Harley-Davidson specifically acknowledges such change in writing.

In the event of employment, I understand that false or misleading information given in my application, resume or interview(s) may result in termination of employment. I understand that I am required to abide by all rules and regulations of the Employer and all policies and procedures in the company Employee Handbook whenever adopted and modified.

Signature: _____ Date: _____