



North American Automotive Group

Name in Full:

Date of Application:

Position Desired:

**North American Automotive Group
1725 Windward Concourse
Suite 110
Alpharetta, GA 30005
www.northamericanautomotive.com**

LAST NAME:		FIRST:	MIDDLE:	SSN #:
HOME ADDRESS:		CITY:	STATE:	ZIP CODE:
PRESENT ADDRESS (If Different)				
RESIDENCE PHONE NUMBER:			WORK PHONE NUMBER:	
MOBILE/PAGER NUMBER:			EMAIL ADDRESS:	
DATE ABLE TO START:			SALARY EXPECTED:	
PREFERRED LOCATION :		WOULD YOU CONSIDER RELOCATION?: YES NO		
ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES?: YES NO <i>If Hired, You Must Be Prepared To Document That You Are Authorized To Work In The United States.</i>				
WILL YOU NOW OR IN THE FUTURE REQUIRE VISA SPONSORSHIP? YES NO				

EDUCATION					
IF APPLICABLE PLEASE STATE THE NAME YOU USED WHILE IN SCHOOL.					
TYPE OF SCHOOL	NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	CIRCLE LAST YEAR ATTENDED	GRADUATED	DEGREE
High School			9 10 11 12	() YES () NO	
College			1 2 3 4	() YES () NO	
College			1 2 3 4	() YES () NO	
Graduate School			1 2 3 4	() YES () NO	
Business, Trade, Other			1 2 3 4	() YES () NO	

Please list any other qualifications or experience gained in professional organizations, school, community activities, or volunteer service which relate to your ability to perform the job for which you are applying. This information is voluntary. (You may exclude all information indicative of race, color, religion, sex, sexual preference, age, national origin, ancestry, or disability.)

If relevant to the job for which you are applying, please indicate special skills, training, certifications or foreign languages that you speak, write or read.

Have you ever been convicted of a crime or violation other than a minor traffic infraction? () YES () NO

(A conviction record will not necessarily be a bar to employment. Factors such as job relations, age, and time of the offense, seriousness and nature of violation and rehabilitation will be taken into account.) If yes, please explain.

EMPLOYMENT EXPERIENCE

(Please enclose resume and complete all information requested in this section.)

EMPLOYER (Including Military Service) Please list in reverse order indicating the most recent job first.	DESCRIPTION OF POSITION AND DUTIES (For Sales positions, state products sold, yearly volume, and territory)	PERIOD OF EMPLOYMENT (Show Month/Year)	
NAME OF ORGANIZATION		FROM /	TO /
ADDRESS AND PHONE NUMBER		STARTING SALARY	LEAVING SALARY
NAME AND TITLE OF SUPERVISOR		STARTING COMMISSION	LEAVING COMMISSION
REASON FOR LEAVING		STARTING BONUS	ENDING BONUS
NAME OF ORGANIZATION		FROM /	TO /
ADDRESS AND PHONE NUMBER		STARTING SALARY	LEAVING SALARY
NAME AND TITLE OF SUPERVISOR		STARTING COMMISSION	LEAVING COMMISSION
REASON FOR LEAVING		STARTING BONUS	ENDING BONUS
NAME OF ORGANIZATION		FROM /	TO /
ADDRESS AND PHONE NUMBER		STARTING SALARY	LEAVING SALARY
NAME AND TITLE OF SUPERVISOR		STARTING COMMISSION	LEAVING COMMISSION
REASON FOR LEAVING		STARTING BONUS	ENDING BONUS

NAME OF ORGANIZATION		FROM /	TO /
ADDRESS AND PHONE NUMBER		STARTING SALARY	LEAVING SALARY
NAME AND TITLE OF SUPERVISOR		STARTING COMMISSION	LEAVING COMMISSION
REASON FOR LEAVING		STARTING BONUS	ENDING BONUS

WHO REFERRED YOU TO NORTH AMERICAN AUTOMOTIVE GROUP _____

PROFESSIONAL REFERENCES

Please list the title, company, and telephone number (s) of at least two past managers/supervisors.

NAME	TITLE/COMPANY	TELEPHONE NUMBER

NOTIFICATION AND AGREEMENT

PLEASE READ BEFORE SIGNING

I CERTIFY THAT ALL ANSWERS GIVEN BY ME ARE TRUE, ACCURATE, AND COMPLETE. I UNDERSTAND THAT THE FALSIFICATION, MISREPRESENTATION OR OMISSION OF FACT ON THIS APPLICATION (OR ANY OTHER ACCOMPANYING OR REQUIRED DOCUMENTS) WILL BE CAUSE FOR DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION OF EMPLOYMENT, REGARDLESS OF WHEN OR HOW DISCOVERED.

Questions regarding this statement should be directed to any employment interviewer before signing. The application will be given every consideration, but its receipt does not imply that the applicant will be employed.

It is the policy of the company to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, national origin, marital status, expunged juvenile records, or pregnancy, and to afford equal opportunities to disabled veterans, veterans of the Vietnam era, and individuals with a disability, any and other characteristics protected by Federal, State, or Local law.

I authorize the investigation of all statements and information contained in this application. I release from all liability anyone supplying such information, and I also release the employer from all liability that might result from making an investigation.

If hired, I agree to abide by all of the company rules and regulations, and understand that, if employed, my employment may be terminated with or without cause, and with or without notice, at any time, at the option of either the company or me. I further understand that no representation, whether oral or written by any representative or agent of North American Automotive Group, at any time, can constitute a contract of employment. I understand that North American Automotive Group and all Plan Administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance, or otherwise change all policies, procedures, benefits, or other terms or conditions of employment. No representative or agent of the company has authority to enter into any agreement for employment for any specified period of time or to make any change in any policy, procedure, benefit or other term or condition of employment other than in a document signed by the President or and Executive Vice President, or to make any agreement contrary to the foregoing.

I acknowledge that I have read and understand the above statement and hereby grant permission to confirm the information supplied on this application by me.

AUTHORIZATION RELEASE

(Please read carefully before signing below)

I understand that consideration for employment is contingent upon the completion and results of the reference checks. Therefore, I authorize North American Automotive Group to verify information related to my education, driving record (if applicable), employment, and any felony convictions. I release from liability all persons or entities collecting such information.

I understand that I will be required to successfully complete a test for drugs. I understand that if hired and subject to federal, state, and local law, I may be required to submit to random drug and/or alcohol testing. Refusal to do so will result in the termination of my employment in accordance with the North American Automotive Group Substance Abuse Policy.

In accordance with the provision of Title V1, P.L.95-508, the Federal Fair Credit Reporting Act, this is to notify you that as part of our procedure for processing your application, a report concerning you may be obtained from a consumer reporting agency; and, to also advise you that you may make a written request for additional information as to the nature and scope of the report requested.

Signature

Date