

# BEST DEAL SPRINGS INC & Truck Parts

444 EAST 100 NORTH  
PAYSON, UT 84651  
Ph: 801-465-4873 or 800-344-2854  
Fax: 801-465-0866  
CORPORATE HEADQUARTERS

155 EAST 4400 SOUTH  
PRICE, UT 84501  
Ph: 435-637-4501 or 800-554-2491  
Fax: 435-637-0402

1437 SOUTH 270 EAST SUITE #2  
St. George, UT 84790  
Ph: 435-652-8933 or 855-219-8933  
Fax: 435-652-8970

## Application for Employment

Please fill out form completely for employment consideration. Print and fax or mail when completed.

*Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin or handicap. We are an equal opportunity employer.*

### Personal Information

Last Name	First	Middle	Date
Street Address			Home Phone (      ) -      -
City, State, Zip			
Business Phone (      ) -      -			Email Address:
What was your previous address?			How long at present address?  _____ Years _____ Months
Are you over 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, employment is subject to verification of minimum legal age.			How long at present address?  _____ Years _____ Months
Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: Month and Year _____ Location _____			Social Security No.  -      -      -
How did you learn of our organization?			
Are you legally eligible for employment in the United States?			When will you be able to work?

Are there any reasons for which you might not be able to perform the job duties (with a reasonable accommodation)?

Yes  No If Yes, please explain.

Drivers License#

State

Any Violations?

Yes  No

## Education

School	Name and location of school	Course of study	No. of years completed	Did you graduate?	Degree or diploma
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
High				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other				<input type="checkbox"/> Yes <input type="checkbox"/> No	

## Military

Complete this section if you served in the U.S. Armed Forces	Branch of Service
Describe your duties and any special training	Period of Active Duty (Month & Year)
	From _____ To _____
	Rank at Discharge
	Date of Final Discharge

**Employment History** Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

1.	Company Name	Telephone ( ) -
	Address	Employed (Start Month and Year)
	Name of Supervisor	From _____ To _____
	Start Job Title and Describe Your Work	Hourly Rate Start _____ Last _____
		Reason for Leaving



The information provided in this Application for Employment is true, correct and complete. If employed, any misstatements or omissions of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. If you decide to engage an investigative consumer reporting agency to report on my credit and personal history, I authorize you to do so. If a report is obtained you must provide, at my request, the name and address of the agency so I may obtain from them the nature and substance of the information contained in the report.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature