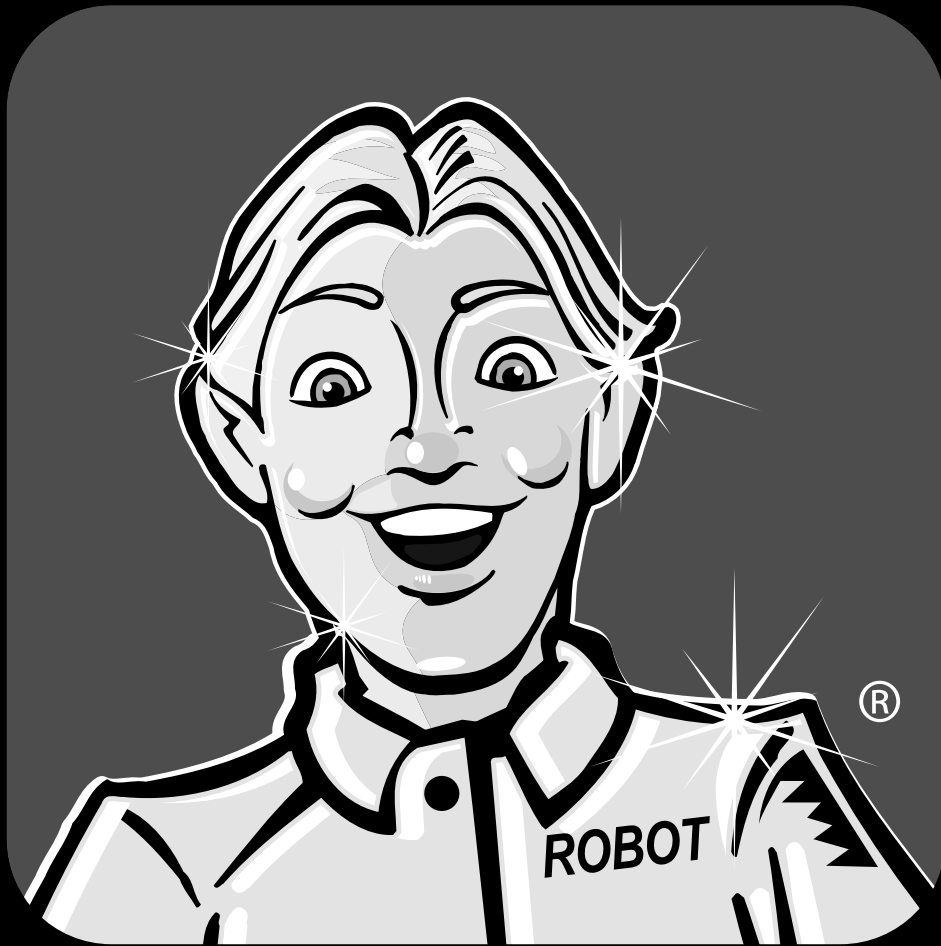


Russell Speeder's



Car Wash

Important - Please read:

Thank you for your interest in a career with Russell's. We appreciate the fact that you're taking the time to complete this application. All applicants will be given equal consideration regardless of race, age, sex, disability, sexual orientation, marital status, color, religion and national origin. Express policy requires that all persons interested in employment complete a written application for a position which has been advertised or posted and for which they are qualified. A resume alone is not sufficient to consider an individual as an applicant. Individuals will not be considered applicants if the application is not filled out entirely. This includes fields either filled out with the requested information or "not applicable" (N/A) for items that don't apply to you. Incomplete applications will be discarded after review.

General Information

Date: _____

Name: _____
(last) (first) (middle)

Address: _____
(street) (city) (state) (zip code)

Telephone Number: (_____) _____ Social Security Number: _____

Drivers License Number _____ State Issued _____ Is Your License Currently Valid? _____

What is the best time to call you? _____ am pm (circle) May we contact you at work? Yes No (circle) If yes, what is your work number? _____

Have you filed an application at any other Russell's location before? _____ If so: Where? _____ Approximate Date: ____/____/____

Have you been employed by Russell's before? Yes No (circle) Do you currently have a family member employed by Russell's? Yes No (circle)

If yes, give dates: From ____/____/____ To ____/____/____ If yes, at which location? _____

Are you eligible for work in this country? Yes No (circle) Proof of citizenship or immigration status will be required upon employment

Minimum Salary Requirement \$ _____/hr

Shift desired: Morning Afternoon Evening (circle) Type of employment desired: Full Time Part Time Temp (circle)

Are you willing to work overtime if required? Yes No (circle)

Please list the days and times you are available: Sun. Mon. Tue. Wed. Thu. Fri. Sat. (circle)

From							
To							

Have you ever been convicted of a felony? Yes No If yes, please explain: _____

Have you ever been convicted of a crime involving theft or dishonesty? Yes No If yes, please explain: _____

Educational Background

	SCHOOL NAME	NO. YEARS	DEGREE	G.P.A.	MAJOR	MINOR
College	_____	_____	_____	_____	_____	_____
High School	_____	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____	_____

Skills and Qualifications: Summarize customer service skills, computer skills and qualifications acquired from employment or other experience which may qualify you to work with our company:

(attach additional sheets if necessary) _____

Personal References

Please list three personal references that you haven't worked for and that you are not related to:

Name	Employed Where	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Were you referred for Russell's employment by a current Russell's associate? Yes No (circle) Referring coworker's name: _____

How did you hear about us? _____

Applicant's First Name _____ Middle _____ Last _____
 I give _____, the "Company", permission to obtain the employment references necessary to make a hiring decision and hold persons giving references free from any and all liability resulting from this process. I waive any provision impeding the release of this information and agree to provide any information necessary for the release of this information beyond that provided on the employment application and reference verification form.

Signature _____

Date _____

Company Information

Company	Address	Phone	From	To
Job Title	Reason For Leaving	Supervisors Name and Title		
Describe duties briefly:			Starting Salary	Ending Salary

Job Information

Did you work overtime? Yes No How often? _____

Were you ever counseled about attendance or tardiness? Yes No If yes, how often? _____

Did you have a performance review? Yes No What was your last performance review rating? _____

What comments did your supervisor make at that time? _____

Reference Information

When we speak to your former supervisor, we will ask him or her to rate your performance with regard to the following categories. Please rate yourself in the following categories as you feel he/she will rate you:

Teamwork: The degree to which you are willing to work harmoniously with others; the extent to which you conform to the policies of management

Unsatisfactory Below Average Average Above Average Outstanding

Dependability: The extent to which you can be depended on to be available for work and do it properly; the degree to which you are reliable and trustworthy; the extent to which you are able to work scheduled days and times, as well as your willingness to work additional hours if needed.

Unsatisfactory Below Average Average Above Average Outstanding

Initiative: The degree to which you act independently in new situations; the extent to which you see what needs to be done and do it without being told; the degree to which you do your best to be a top employee.

Unsatisfactory Below Average Average Above Average Outstanding

Quality: The degree to which your work is free from errors and mistakes; the extent to which your work is accurate; the quality of your work in general.

Unsatisfactory Below Average Average Above Average Outstanding

Customer Service: The degree to which you relate to customer's needs or concerns.

Unsatisfactory Below Average Average Above Average Outstanding

Overall Performance: The degree to which your previous employer was satisfied with your efforts and achievements.

Unsatisfactory Below Average Average Above Average Outstanding

Did you resign from this position? Yes No Discharged? Yes No Laid-Off? Yes No
 Were you ever disciplined on the job? Yes No Explain: _____

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IMPORTANT

READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING

By my signature and initials placed below, I promise that the information provided in this employment application (and accompanying resume, if any) is true and complete, and I understand that any false information or significant omissions may disqualify me from further consideration for employment, and may be justification for my dismissal from employment, if discovered at a later date. I agree to immediately notify the company, during my period of employment, if hired, of any pending or future criminal convictions.

_____ Initials

I understand that if I'm given a conditional offer of employment, I may be required to complete a post-offer medical questionnaire and/or undergo a physical examination, including a drug and alcohol screening exam and x-rays, and I consent to the release to the company of any and all medical information, as may be deemed necessary by the company in judging my capability to do the work for which I am applying. I understand that if required, all entering employees in the same job category will be subject to the same medical questionnaire and/or examination and all information will be kept confidential and in a separate file.

_____ Initials

I authorize the investigation of all statements contained in this application. I also authorize the company to contact my present employer, past employers, and listed references. If employed, I also grant permission for the company to release recommendations concerning my employment to perspective employers. I understand that the company may request an investigative consumer report from a consumer reporting agency that includes information as to my character, general reputation, credit history, personal characteristics and mode of living. I also understand that under the Federal Fair Credit Reporting Act I have the right to make a written request to the company, within a reasonable time, for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the main address of the reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.

_____ Initials

I authorize any person, school, current employer or organization named in this application form to provide the company with relevant information and opinion that may be useful to the company in making a hiring decision, and I release such persons and organizations from any legal liability in making such statements. I also authorize the company to conduct a check of my background, including criminal records and motor vehicle operation records.

_____ Initials

I certify that I am honestly interested in working in the position for which I have applied, and am making this application for no other purpose. I realize this application is only current for sixty days.

_____ Initials

I understand that, if hired, I am agreeing to uphold and comply with the personnel policies and procedures and safety procedures and rules established by the company, including provision of proof of identity and legal work authorization.

I understand that this application does not create a contract of employment. I understand and agree that, if hired, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD OF TIME AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES OR SALRY, BE TERMINATED AT ANY TIME. I understand that NO SUPERVISOR OR OTHER OFFICIAL OF THE EMPLOYER, EXCEPT ITS CHIEF EXECUTIVE OFFICER, IN WRITING, IS AUTHORIZED TO CHANGE ANY OF THE TERMS MENTIONED IN THIS EMPLOYMENT APPLICATION FORM.

_____ Initials

AUTHORIZATION FORM FOR CONSUMER REPORTS

In connection with your application for employment with **Minuteman Car Wash, Express Car Wash, Car Wash Express and Russell Speeder's Car Wash** (including contract for services), understand that consumer reports or investigative consumer reports which may contain public record information may be requested or made on you including consumer credit, criminal records, driving record, education, prior employer verification, workers compensation claims and others. These reports will include experience information along with reasons for termination of past employment. Further, understand that information from various Federal, State, local and other agencies which contain your past activities will be requested. A consumer report containing injury and illness records and medical information may be obtained only after a tentative offer of employment has been made.

By signing below, you hereby authorize without reservation, any party or agency contacted by this employer to furnish the above mentioned information. You further authorize ongoing procurement of the above mentioned reports at any time during your employment (or contract). You also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original.

You have the right to make a request of Hirecheck, upon proper identification and the payment of any legally permissible fees, for the information in its files on you at the time of your request.

You hereby authorize and request, without any reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agencies, or other persons or agencies having knowledge about you to furnish First Advantage with any and all background information in their possession regarding you, in order that your employment qualifications may be evaluated.

Print your Name:

Street Address:

City: State: Zip:

Social Security Number:

Drivers License State: License Number:

The following is for identification purposes only to perform the background check:

Date of Birth (MM/DD/YYYY): _____ **Race:** _____ **Gender (M or F):** _____

Other or Former Names:

Signature: _____ **Date:** _____