



APPLICATION FOR EMPLOYMENT

H-E Parts International is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, citizenship status, age, gender, disability, genetic information, veteran status or any other characteristic protected by federal, state, or local law. We are a Drug Free Workplace. All offers of employment are contingent upon successful completion of a drug screening and criminal background screening, unless otherwise mandated by state law. Information on this application applies fully to each HEPI subsidiary.

INTRODUCTORY INFORMATION

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____ E-mail Address: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Check the box corresponding with the HEPI organization you are applying to:

- H-E Parts Mining
 H-E Parts Distribution
 H-E Parts International
 Morgan Brake & Clutch

APPLICANT QUESTIONS

Type of Work Desired: _____ Desired Salary: _____ Date Available: _____

Position Desired: Full Time Part Time Temporary

If hired, can you provide documents required to establish your eligibility to work in the U.S.? Yes No

Are you 18 years of age or older? Yes No How were you referred to this company? _____

List languages you speak and/or write and note if you speak/write that language:

WORK-RELATED REFERENCES (do not include relatives)

	Name	Relationship	Years Known	Contact Information
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

EDUCATION

	Name and Location of School	Circle Last Year Completed	Did You Graduate?	Subjects Studied or Degree Obtained
High School	_____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
College	_____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Other Education or Training	_____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

RECORD OF EMPLOYMENT (list positions starting with your most recent)

Employer: _____ Phone: (_____) _____
Address: _____
Position Title: _____ Supervisor: _____
From: _____ To: _____ Beginning Salary: _____ Ending Salary: _____
Responsibilities: _____
Reason for Leaving: _____
May we contact this supervisor as a reference? **Yes** **No**

Employer: _____ Phone: (_____) _____
Address: _____
Position Title: _____ Supervisor: _____
From: _____ To: _____ Beginning Salary: _____ Ending Salary: _____
Responsibilities: _____
Reason for Leaving: _____
May we contact this supervisor as a reference? **Yes** **No**

Employer: _____ Phone: (_____) _____
Address: _____
Position Title: _____ Supervisor: _____
From: _____ To: _____ Beginning Salary: _____ Ending Salary: _____
Responsibilities: _____
Reason for Leaving: _____
May we contact this supervisor as a reference? **Yes** **No**

STATEMENT (read this statement carefully before signing this application)

I understand that employment with H-E Parts International and any subsidiary (“Company”) is at-will meaning that the Company or I may terminate my employment at any time, or for any reason with or without advance notice. The only exception to the at-will employment relationship is as defined by Montana state law and is only applicable to employees working in Montana.

I authorize the Company to conduct a thorough background investigation of my work and personal history, and verify all data given on this application and during interviews. I hereby release H-E Parts International and its representatives or agents, from any liability that might result from such an investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information.

I understand that the Company requires the successful completion of both a criminal background screen and a drug test as a condition of employment, unless otherwise directed by state law.

I understand this application will be active for a period of 90 days; after that time, if I wish to be considered for employment, I must submit a new application.

I certify that all the statements in this completed application are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire.

Signature of Applicant: _____ **Date Signed:** _____