

**CHAINWHEEL DRIVE, INC.**  
**EMPLOYMENT APPLICATION**

**Personal Information:**

Name \_\_\_\_\_ Date \_\_\_\_\_

Present address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Previous address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

How long at current address? \_\_\_\_\_ How long at previous address? \_\_\_\_\_

Home phone number \_\_\_\_\_ Alternate/Cell phone number \_\_\_\_\_

Email address \_\_\_\_\_ SS# \_\_\_\_\_

Are you 18 years of age or older? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you legally eligible for employment in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been charged with or convicted of a crime in any state (including felonies, misdemeanors, guilty pleas, or pleas of nolo contendere) other than minor traffic offenses? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

Note: Applicants may be subject to a background check. A prior charge or conviction will not necessarily bar you from employment; however, the type of conviction and when it occurred will be considered.

If hired, would you be able to perform all functions and all necessary job assignments of the particular job for which you are applying? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please explain

\_\_\_\_\_

Have you ever received workmen's compensation or disability income payments? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe \_\_\_\_\_

\_\_\_\_\_

How did you learn of our organization? \_\_\_\_\_

\_\_\_\_\_

What interest or background in cycling do you have (activities, competition, home repair, etc.)?

\_\_\_\_\_

\_\_\_\_\_

**Employment Interest:**

Sales/merchandising \_\_\_\_ Technician \_\_\_\_ Assembler \_\_\_\_ Inventory control/purchasing \_\_\_\_

Bookkeeping \_\_\_\_ Office Assistant \_\_\_\_

Date available to start \_\_\_\_\_ Pay/wages desired \_\_\_\_\_

Are you employed now? \_\_\_\_\_ If yes, may we contact your present employer? \_\_\_\_\_

If no, please explain \_\_\_\_\_

Have you ever applied to Chainwheel Drive before? Yes \_\_\_\_ No \_\_\_\_

Which location? \_\_\_\_\_ When? \_\_\_\_\_

Please indicate hours you can work. If no limitations, list all.

Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thur \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

Number of hours you wish to work per week: \_\_\_\_\_

**Education:**

	Name and Location of School	Subjects Studied/ Degree	Did you graduate?	# Years Attended
Elementary School				
High School				
College				
Trade or Business				

**Military Service:** *Complete this section if you served in the U.S. Armed Forces.*

Describe your duties and any special training \_\_\_\_\_

Branch of service \_\_\_\_\_ Rank at discharge \_\_\_\_\_

Period of active duty (Month & Year): From \_\_\_\_\_ To \_\_\_\_\_

Date of discharge \_\_\_\_\_

Present membership in National Guard or Reserves \_\_\_\_\_

**Employment History:**

Please list your full-time and part-time employment record for your past four positions, starting with your present or most recent employer and account for any periods of unemployment. Use a separate sheet, if necessary.

Company Name	Telephone
Address	Dates Employed: From _____ To _____
Name of Supervisor	Weekly Pay: Start _____ Last _____
State Job Title and Describe Your Work	Reason for leaving

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Except for vacations and holidays, how many work days were you absent during the past calendar year?

0-5 days \_\_\_\_ 6-10 days \_\_\_\_ 11-15 days \_\_\_\_ 16-20 days \_\_\_\_ 21+ days \_\_\_\_

**References:** Give the names of three persons not related to you, whom you have known at least one year.

Name	Address	Relation to you	Phone	Years Acquainted

**Service Department Supplement: (Service applicants only)**

Please indicate your ability to perform the following tasks, **WITHOUT SUPERVISION OR ASSISTANCE.**

*Answer the questions with a 'yes' or 'no' answer.*

Can you adjust: Headsets? \_\_\_\_\_ Hubs? \_\_\_\_\_ Bottom brackets? \_\_\_\_\_

Can you overhaul: Headsets? \_\_\_\_\_ Hubs? \_\_\_\_\_ Bottom brackets? \_\_\_\_\_

Can you install tires and tubes? \_\_\_\_\_ Can you install tubular tires? \_\_\_\_\_

Can you size and install a chain? \_\_\_\_\_ Do you know how to check a chain for wear? \_\_\_\_\_

Do you know how to adjust the limit screws on derailleurs? \_\_\_\_\_

Can you install road bike brake lever/shifters (STI,Ergo) ? \_\_\_\_\_

Can you true wheels? \_\_\_\_\_ Can you build wheels? \_\_\_\_\_

Can you replace spokes and find the proper length? \_\_\_\_\_

Can you overhaul spring/elastomer suspension forks? \_\_\_\_\_

Can you overhaul air/oil suspension forks? \_\_\_\_\_

**CERTIFICATION: (All applicants)**

I hereby authorize the release of any employment data relevant to my employment with Chainwheel Drive, Inc. for the purpose of a bona fide credit and employment investigation. I authorize a thorough investigation of my past employment activities, and background and agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying such information. This investigation shall also include a determination regarding whether I have a criminal record.

I fully understand that if employed, any misrepresentation or omission on this application will result in dismissal, regardless of the date of discovery. Employment may also be subject to my passing a medical examination as required by the Personnel policies of Chainwheel Drive, Inc. and to a satisfactory review of my references.

I understand that neither the Application nor any statement made to me during the hiring process or thereafter shall be considered a contract of employment of any kind. Where such a contract is intended, I understand that it will be separately entered into and signed by the President of the Company.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_