



1000 Seville Road  
Wadsworth, OH 44281  
USA

1.800.924.5172  
Fax 330.331.2020  
www.ecstuning.com

Please Print All Information Requested

ECS Tuning Application For Employment  
Applicant May Be Tested For Illegal Drugs

Personal Information:

Name: \_\_\_\_\_  
Last First Middle

Present address: \_\_\_\_\_  
Street  
City State Zip Code

Years at current address: \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Position applied For: \_\_\_\_\_

Employment desired:  Full Time  Part Time  Any Available

How many hours can you work weekly? \_\_\_\_\_ First date available for work: \_\_\_\_\_

Salary desired (please be specific): \_\_\_\_\_ Social Security #: \_\_\_\_\_

Name of School	Address	Years Completed	Major & Degree

Have you ever been convicted of a crime?  Yes  No

If YES, please provide a detailed explanation

\_\_\_\_\_



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**Work History:** Please list your work experience for the past five years beginning with your most recent job.

**JOB #1**

Company: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
 Address: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 \_\_\_\_\_ Start Date: \_\_\_\_\_  
City State Zip Code  
 Telephone: \_\_\_\_\_ End Date: \_\_\_\_\_  
 Reason for leaving (be specific): \_\_\_\_\_  
 Job Duties and Tasks Performed: \_\_\_\_\_  
 Starting Hourly Wage: \_\_\_\_\_ Current Hourly Wage: \_\_\_\_\_

**JOB #2**

Company: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
 Address: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 \_\_\_\_\_ Start Date: \_\_\_\_\_  
City State Zip Code  
 Telephone: \_\_\_\_\_ End Date: \_\_\_\_\_  
 Reason for leaving (be specific): \_\_\_\_\_  
 Job Duties and Tasks Performed: \_\_\_\_\_  
 Starting Hourly Wage: \_\_\_\_\_ Current Hourly Wage: \_\_\_\_\_

**JOB #3**

Company: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
 Address: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 \_\_\_\_\_ Start Date: \_\_\_\_\_  
City State Zip Code  
 Telephone: \_\_\_\_\_ End Date: \_\_\_\_\_  
 Reason for leaving (be specific): \_\_\_\_\_  
 Job Duties and Tasks Performed: \_\_\_\_\_  
 Starting Hourly Wage: \_\_\_\_\_ Current Hourly Wage: \_\_\_\_\_

May we contact your present employer?  Yes  No



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**Transportation:**

Do you have a valid driver's license?  Yes  No

What is your means of transportation to work? \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Have you had any accidents during the past 3 years?  Yes  No If YES, How many? \_\_\_\_\_

Have you had any moving violations during the past 3 years?  Yes  No If YES, How many? \_\_\_\_\_

**References:** (Please list two references other than relatives or previous employers)

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Relation: \_\_\_\_\_

Relation: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City State Zip Code

City State Zip Code

Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

**Questions:**

Why are you applying for a position with ECS Tuning?

\_\_\_\_\_

What motivates you to do your best work?

\_\_\_\_\_

Describe a mistake you have made in a past position. How did you resolve your mistake?

\_\_\_\_\_

What computer programs do you use daily?

\_\_\_\_\_

Do you work best in a structured or unstructured environment, and why?

\_\_\_\_\_

What do you see yourself doing in 5 years?

\_\_\_\_\_



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Application Form Waiver:

In exchange for the consideration of my job application by ECS Tuning (hereinafter called the "Company"), I Agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Company, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and the relationship cannot be altered except by a written instrument signed by the President/General Manager of the Company. Both the undersigned and the Company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contact.

I also understand that (1) the Company has a drug and alcohol policy that may require preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application and for your interest in our business.

Did you complete this application yourself?  Yes  No

How did you hear about this position? (be specific) \_\_\_\_\_

If you were referred to this position by a current ECS employee,  
please list their full name here: \_\_\_\_\_