



Collector Car & Boat Insurance

Hagerty Insurance Agency

An Equal Opportunity Employer

Employment Application

PERSONAL INFORMATION:

Name: _____ Email address: _____

Current Address: _____ Phone #: _____

City: _____, State: _____, Zip Code: _____

Position Applying for: _____ Date available to start? _____ Wage Request \$ _____

List any special training or skills that would be of benefit in the position, for which you are applying:

EDUCATIONAL BACKGROUND:

Type	Circle One	Name & Location	Course of Study	# of Years	Graduate?
High School	9 10 11 12				
College					
Graduate School					
Vocational					
Other					

EMPLOYMENT BACKGROUND: (list your past 3 employers, starting with the most recent: complete even if resume is submitted.)

Employer	Supervisor	Summary of Responsibilities
Employer Address	Phone #	
	Dates of Employment From: To:	Reason for Leaving
Job Title	Starting Wage: Ending Wage:	

Employer	Supervisor	Summary of Responsibilities
Employer Address	Phone #	
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REFERENCES: (Do not use former supervisors that are listed above, and do not list relatives.)

NAME	ADDRESS	PHONE #
1		
2		
3		

Have you ever been convicted of, or are you currently charged with, committing a crime, whether or not adjunction was withheld?

Yes _____ No _____

"Crime" includes a misdemeanor, felony or a military offense. You may exclude misdemeanor traffic citations and juvenile offenses.

"Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, or having been given probation, a suspended sentence or a fine.

I hereby affirm and declare that all the foregoing statements are true and correct, and that I have not knowingly withheld any fact that would, if disclosed, affect my application unfavorably. I understand that the falsification of any information provided to Hagerty Insurance Agency, including that contained in my employment application, or the failure to accurately disclose information requested, may result in a decision not to hire me, or may result in the termination of my employment.

I understand that nothing herein or otherwise shall be deemed to create any contract of employment between Hagerty Insurance Agency and me, and that my employment may be terminated at will by Hagerty Insurance Agency at any time without advance notice. I further understand that no manager or representative of Hagerty Insurance Agency has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I have read and understand the above statements.

Signature of applicant: _____ Date: _____
