# PRE-EMPLOYMENT DRUG SCREEN CONSENT AND AUTHORIZATION

I \_\_\_\_\_\_\_\_\_ hereby consent to submit to a pre-employment drug screen, and authorize the results of the screening be made available to **Holland Motorsports, Inc. ("Company")** in order to comply with their policy regarding selection of applicants for employment.

I understand that current use of illegal drugs and/or abuse of alcohol that prohibits me from being employed by the Company.

I agree to hold harmless the Company and its agents (including the above named physician or clinic) from any liability arising in whole or part out of the collection of specimens, testing, and use of the information from said testing in connection with the Company's consideration of my continuing employment.

I further agree that a produced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I acknowledge that signing this consent and release form is a voluntary act on my part. I have read and understand the above statements, and consent to a pre-employment drug screen.

| Printed |            |       |
|---------|------------|-------|
| Name:   | Signature: | Date: |
|         |            |       |

# MOTOR VEHICLE RECORD SEARCH CONSENT AND AUTHORIZATION

It is a policy of Holland Motorsports, Inc. ("Company") to obtain and review the Motor Vehicle Record (MVR) on each prospective employee to certify that he applicant holds a valid license, and that their driving record is within the parameters set by the Company driving policy.

The following will be used to determine employment consideration no matter what state the violation occurred in, and regardless of whether the violation occurred while operating a Company or personal vehicle. A safe driving record is a condition of employment. Verification will be based on the last three (3) years driving history from the date of the MVR. An offer of employment may not be offered should a driver exceed the standards outlined below:

## Violations to include seat belt violations:

- Three traffic violations in a 3-year period for drivers over the age of 25
- Two traffic violations in a 3-year period for drivers between 18 and 25
- One traffic violations in a 3-year period for drivers 17 and under

Accidents: Any fault or preventable accident counts as one traffic violation

#### Convictions due to:

- Leaving the scene of an accident
- Driving while intoxicated (DWI) or Driving under the influence (DUI)
- Failure to take a breath analyzer test
- Suspension of license
- Two or more preventable accidents in a 12-month period
- Eluding or attempting to elude police
- Racing
- Reckless driving which results in injury to a person
- Homicide or assault arising from the operation of a motor vehicle
- Passing a stopped school bus

I acknowledge that signing this consent and release form is a voluntary act on my part. I have read and understand the above statements, and consent to a MVR check.

| Printed<br>Name:  | Signature:                           | Date:          |
|-------------------|--------------------------------------|----------------|
| Date of<br>Birth: | Driver License#<br>and State Issued: | DL Expiration: |

# Application for Employment Holland Motorsports, Inc.

| Printed Name:                |                           |                     |
|------------------------------|---------------------------|---------------------|
| Position(s) Applied For:     |                           |                     |
| Type of employment desired:_ | Full Time Part Time       |                     |
| _                            | Harley-Davidson of Dothan | Holland Motorsports |

## WE ARE AN EQUAL OPPORTUNITY EMPLOYER

### **APPLICANT'S STATEMENT**

I understand that neither the completion of this application nor any part of my consideration for employment establishes any obligation for **Holland Motorsports, Inc. ("Company")** to hire me. I understand that this application is not a promise of employment, and that if I am hired, my employment will be for no definite period, and the Company or I can terminate employment at any time for any reason, with or without cause, and without any prior notice. No one, other than the owner of the Company, has the authority to modify this relationship, or make any agreement to the contrary. Any such modification or agreement must be made in writing and signed by an authorized agent. I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Company.

I understand that a drug/alcohol test may be required prior to employment, and at any time during my employment, to the extent permitted by applicable law. I also understand that I may be required to take other tests prior to my employment.

I understand that the Company may do a thorough background check to include an investigation of my driving record (MVR), and criminal history record, and that personal information may be obtained through reference checks. I also understand that the Company may contact my previous employers. I authorize my former employers to disclose all pertinent information to my employment with them. In authorizing the release of information regarding my employment, I fully waive any rights or claims I have or may have against my former employers, their agents and representatives, as well as other individuals who release information to the Company. I release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me.

I further understand that the Company will conduct an annual review of each employee's driving record, and based on that review an annual MVR may be ordered. It is Company policy to intermittently check an employee's driving record and if the results do not meet the criteria set by management that driving privileges may be revoked, or other disciplinary action may be taken. Company policy also states that all moving violations must be reported to your manager within 24-hours of the occurrence, and failure to do so could result in loss of driving privileges, or termination.

I attest with my signature below that I have given to the Company true and complete information on this application. I authorized the Company to contact references for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

# Applicant Information

| (Print please) Last Nam                             | 1e  | First Name           |                     | Middle Init              | tial                                  |
|---|---|----------------------|---------------------|--------------------------|---------------------------------------|
| Address   |   | (City)               | (State)             | (Zip Code)               |                                       |
| Telephone No. (<br>(Ar                              | )<br>ea Code)                                   |                      |                     |                          |                                       |
| Driver's License No. (If                            | required by job):                               |                      |                     | State:                   |                                       |
|   | for employment in this ip or Immigration status |                      |                     | Yes<br>t)                | No                                    |
| If you are under 18, ca                             | n you furnish a work per                        | mit?                 |                     | Yes                      | No                                    |
| Can you perform the e                               | ssential functions of the                       | position for whic    | h you are applying  | g?Yes                    | No if no, please explain:             |
| Have you ever been en                               | nployed here before?                            | Yes                  | No                  |                          |                                       |
|   |   |                      |                     |                          | & Position                            |
|   |   |                      |                     |                          | cense? Yes No                         |
|   | motorcycle endorsemer                           |                      |                     |                          |                                       |
| Have you been cited fo                              | or a traffic violation with                     | in the last three (3 | 3) years? \         | res No                   | If yes, give dates and details below. |
|   |   |                      |                     |                          |                                       |
| -   | d or convicted of a crime                       | -                    | noving traffic viol | ations, within the       | last three (3) year?                  |
| Have you ever been te                               | rminated or asked to res                        | ign from a job? _    | Yes                 | NO If yes, give dates an | d details below.                      |
| Explain any gaps in you                             | ir employment history b                         | elow:                |                     |                          |                                       |
| Educational and Exper<br>List at least three (3) so | ience<br>chools attended, starting              | s with last one.     |                     |                          |                                       |
|   | <u>High Sc</u>                                  | hool                 | College/Univ        | versity <u>o</u>         | Graduate/Professional                 |
| School Name:  |   |                      |                     | ·                        |                                       |
| Years Completed:                                    |   |                      |                     |                          |                                       |
| Diploma or Degree:                                  |   |                      |                     |                          |                                       |
| Course of Study/Major                               | :   |                      |                     |                          |                                       |
| Skills and Qualification                            | <u>15</u>                                       |                      |                     |                          |                                       |

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Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work with our company.

| <u>Employment History</u><br>List your last four (3) employers, ass<br>Explain any gaps in employment in c  | -                 | unteer activities, starting with the most re<br>below.                   | ecent, including military experience |
|---|-------------------|--|--------------------------------------|
| Employer :  | Adc               | Iress:   | Telephone:                           |
| Dates Employed: From:   | To:               |  |                                      |
| Hourly Rate/Starting Salary: \$   | per               | Hourly Rate/Ending Salary: \$  | per                                  |
| Job Title   |                   | Immediate Supervisor   |                                      |
| Summarize the nature of the work p  | erformed and jol  | b responsibilities (use back of this page if                             | needed):                             |
| Reason for Leaving:   |                   |  |                                      |
| Employer :  | Adc               | Iress:   | Telephone:                           |
| Dates Employed: From:   | To:               |  |                                      |
|   |                   |  |                                      |
| Hourly Rate/Starting Salary: \$   | per               | Hourly Rate/Ending Salary: \$  | per                                  |
| Job Title   |                   | Immediate Supervisor   |                                      |
| Job Title<br>Summarize the nature of the work p   | performed and jol | Immediate Supervisorb responsibilities (use back of this page if         |                                      |
| Job Title<br>Summarize the nature of the work p<br><br>Reason for Leaving:  | performed and jol | Immediate Supervisor<br>b responsibilities (use back of this page if     | needed):                             |
| Job Title<br>Summarize the nature of the work p<br><br>Reason for Leaving:<br>Employer :  | erformed and jol  | Immediate Supervisor<br>b responsibilities (use back of this page if     | needed):                             |
| Job TitleSummarize the nature of the work p<br>Reason for Leaving:<br>Employer :<br>Dates Employed: From:   | erformed and jol  | Immediate Supervisor<br>b responsibilities (use back of this page if     | needed):                             |
| Job Title<br>Summarize the nature of the work p<br>Reason for Leaving:<br>Employer :<br>Dates Employed: From:<br>Hourly Rate/Starting Salary: \$                  | Derformed and jol | Immediate Supervisor<br>b responsibilities (use back of this page if<br> | needed):<br><br>Telephone:           |
| Job Title<br>Summarize the nature of the work p<br><br>Reason for Leaving:<br>Employer :<br>Dates Employed: From:<br>Hourly Rate/Starting Salary: \$<br>Job Title | Derformed and jol | Immediate Supervisor<br>b responsibilities (use back of this page if     | needed):<br><br>Telephone:           |

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List professional, trade, business, or civic associations and any offices held. (Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability, or other protected status.)

List special accomplishments, publications, awards. (Exclude information which would reveal sex, race, religion, national origin, age, color, disability, or other protected status.)

### Personal References

Please list three (3) individuals who know you well (do not include relatives).

| 1. | Name: | Phone: | Years Known: |
|----|-------|--------|--------------|
| 2. | Name: | Phone: | Years Known: |
| 3. | Name: | Phone: | Years Known: |

### Applicant Statement

Holland Motorsports, Inc. is an equal opportunity employer and does not discriminate in employment on the basis of race, color, religion, age, national origin, gender, marital status, disability, handicap, or veteran status.

I understand that neither the completion of this application nor any part of my consideration for employment establishes any obligation for Holland Motorsports, Inc. to hire me. I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment at any time for any reason, with or without cause and without prior notice. I understand that no representative of Holland Motorsports, Inc. has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Holland Motorsports, Inc. true and complete information on this application. I authorize Holland Motorsports, Inc. to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_