



# APPLICATION

**SERVING SOUTH FLORIDA SINCE 1978**  
 1990 N.W Boca Raton Blvd.  
 Boca Raton, FL 33432

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## Notice To Applicants

FEDERAL AND STATE LAW REQUIRES THAT ALL APPLICATIONS BE CONSIDERED WITHOUT REGARD TO RACE, RELIGION, COLOR, SEX, AGE OR NATIONAL ORIGIN. WE BELIEVE IN AND FULLY SUPPORT THE PRINCIPLE OF EQUAL TO ALL OPPORTUNITY AND WILL FULFILL OUR OBLIGATION TO THE FULLEST.

NAME \_\_\_\_\_ SOCIAL SECURITY \_\_\_\_\_  
 LAST FIRST MIDDLE  
 PRESENT ADDRESS \_\_\_\_\_  
 STREET CITY STATE ZIP  
 TELEPHONE NUMBER \_\_\_\_\_ HOW LONG HAVE YOU LIVED AT PRESENT ADDRESS? \_\_\_\_\_  
 PREVIOUS ADDRESS \_\_\_\_\_ HOW LONG? \_\_\_\_\_  
 STREET CITY STATE ZIP  
 POSITION APPLIED FOR: AVAILABLE  FULL TIME  PART TIME  
 IF PART TIME, SPECIFY HOURS DESIRED BY DAY: SUN \_\_\_\_\_  
 MON \_\_\_\_\_ WED \_\_\_\_\_ FRI \_\_\_\_\_  
 TUES \_\_\_\_\_ THURS \_\_\_\_\_ SAT \_\_\_\_\_  
 EXPECTED EARNINGS:  START \_\_\_\_\_ 6MO. \_\_\_\_\_ 1 YEAR \_\_\_\_\_  
 HOW DID YOU HEAR OF THIS OPPORTUNITY?  
 \_\_\_\_\_  
 HAVE YOU WOKED WITH A LIMO COMPANY BEFORE?  NO  YES WHEN / HOW LONG? \_\_\_\_\_  
 PREVIOUS COMPANY \_\_\_\_\_ REASON FOR LEAVING? \_\_\_\_\_  
 LIST ANY FRIEND/RELATIVES WORKING WITH US NOW \_\_\_\_\_  
 LIST ANY SPECIAL SKILLS YOU HAVE FOR POSITIONS APPLIED FOR ABOVE \_\_\_\_\_

**A VALID CHAUFFEURS LICENSE IS REQUIRED BY PALM BEACH COUNTY & BROWARD COUNTY TO WORK IN THE LIMOUSINE INDUSTRY**

ARE YOU OVER 21?  YES  NO (If No, hire is subject to minimum legal age verification.)  
 SEX:  MALE  FEMALE  HEIGHT: \_\_\_\_\_ Ft. \_\_\_\_\_ In.  WEIGHT: \_\_\_\_\_ LBS  
 MARTIAL STATUS:  SINGLE  MARRIED  SEPERATED  DIVORCED  WIDOWED  
 No. YEARS MARRIED \_\_\_\_\_ No. of Dependants \_\_\_\_\_ (Including yourself?)  
 HAVE YOU EVER BEEN BONDED?  NO  YES - WHEN \_\_\_\_\_  
 HAVE YOU EVER BEEN CONVICTED OF A CRIME IN THE PAST 10 YEARS (Excluding Traffic Violations)?  NO  YES  
 IF YES, LIST CONVICTIONS \_\_\_\_\_  
 DO YOU HAVE ANY PHYSICAL HANDICAPS PREVENTING YOU FROM DOING CERTAIN TYPES OF WORK?  NO  
 YES IF YES, DESCRIBE HANDICAP/LIMITATIONS \_\_\_\_\_  
 HAVE YOU HAD ANY SERIOUS ILLNESS IN THE PAST 5 YEARS?  NO  YES IF YES, DESCRIBE \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**A1A Airport and Limousine is a Drug Free Workplace**