

White Auto Body



White Christmas Program 2011

Candidate Application

DUE NOVEMBER 4, 2011

I. Personal Information

Full Name: _____

Address: _____
Street City State Zip

Daytime Phone: _____ Evening Phone: _____

Date of Birth: _____

List all sources of financial support: _____

II. Driver Information

1. Do you have a valid Missouri Driver's License? Yes No

If yes, please provide the following:

Drivers License Number: _____ Expiration Date: _____

If no, please explain: _____

2. Has your driver's license ever been suspended or revoked? Yes No

3. Have you had any moving violations or criminal infractions in the past five years?

Yes No

If yes, please explain: _____

4. Are you insurable? Yes No

5. Can you drive a car with a manual/standard transmission (i.e. - stick shift)?

Yes No

6. Do you have any limitations that could prevent you from driving a particular type of vehicle?

Yes No

If yes, explain: _____

7. List the names and relationship of any other persons who will be driving this vehicle:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

III. Vehicle Information

1. Do you currently own or have an automobile that you use on a regular basis?

Yes No

If yes, explain: _____

2. Do you currently have automobile insurance? Yes No

If yes, please provide the name of your insurance agent and their telephone number:

Agent Name	Insurance Company Name	Contact Number
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IV. Employment Information

1. Are you currently employed? Yes No

If yes, please provide the following information:

a.) Employer/Company: _____

Supervisor Name: _____

Address: _____

Telephone Number: _____

Date(s) of Employment: _____

b.) Employer/Company: _____

Supervisor Name: _____

Address: _____

Telephone Number: _____

Date(s) of Employment: _____

V. References

Please provide names and telephone numbers of individuals who can provide a character reference.

- 1. _____
Name Relationship Contact Number
- 2. _____
Name Relationship Contact Number
- 3. _____
Name Relationship Contact Number

VI. Other

1. This event will receive media coverage. If selected, are you willing to appear on TV and/or have your name appear in news articles?

Yes No

2. How did you learn about the White Christmas Program?

Please use checklist below to ensure you have included the following:

<input type="checkbox"/>	Completed Three-Page Application
<input type="checkbox"/>	One-Page Account/Narrative
<input type="checkbox"/>	Supporting Documents, if applicable

Applicant Signature

Date