



CONDITIONAL OFFER OF EMPLOYMENT

APPLICANT'S FULL LEGAL NAME _____ E-MAIL ADDRESS _____

PHONE _____ POSITION TO BE FILLED _____ HIRE DATE _____

LOCATION MAKING CONDITIONAL OFFER _____
Store # _____ City _____ State _____

FULL TIME PART TIME SEASONAL SALARY HOURLY

ELIGIBLE FOR BENEFITS YES NO STARTING PAY RATE _____

COMMISSION YES NO

NAME OF I9 FORM APPROVER _____

I acknowledge NKC Tire has offered me the above employment position. I understand this offer of employment is conditional upon my acceptance of the following:

- 1) Availability of the position
- 2) Favorable pre-employment screening results
- 3) Acceptance of this offer within a maximum of five days from the date of this offer
- 4) Must have a valid driver's license in this state; and
- 5) Must be insurable by our insurance carrier through a State MVR inquiry

I understand I will not begin working until the above conditions are accepted. I understand that if I do not meet the above conditions, this offer of employment will be automatically withdrawn and I will not be employed.

If I am employed, I agree to abide by all Company policies. I further understand that employment with NKC Tire is employment-at-will as provided by the statutes of the State of _____ ,
(Name of State)

and that the Company reserves the unilateral right to modify its policies from time to time and to terminate my employment with the Company at any time and for any reason. I also understand upon the 1st day of employment I will be subject to a 90-day introductory period. Upon completion of the introductory period my performance will be evaluated.

I have read and understand this "Conditional Offer of Employment." I have seen the job description for this position, read the essential duties for it, and understand the requirements to perform this job satisfactorily.

Applicant Signature

Date

Store Manager or Company Representative Signature

Date