

3. Languages which you can fluently: Speak

## **APPLICATION FOR EMPLOYMENT**

(Please Print Legibly)				Date:			
Last Name		First Name		Middle			
Current Address			City	State	Zip		
Cell Phone			Email Addres	ss			
Home Phone							
Position Applying for:				How did you find out about this position?			
Will you accept: (check all that apply)			What is your	salany requirement?			
Full Time Part Time	Temporary	On Call	•	What is your salary requirement?  When will you be available to start?			
Night Saturdays	Sundays		When will yo				
CHECK YES OR NO TO EACH	OF THE FOLLOV	WING QUEST	IONS, EXPLAIN	WHEN NECESSARY.			
YES NO							
1. Are	e you over 18 yea	ars of age? (If	no, a work perm	it or proof of emancipation wi	I be requir	ed.)	
2. Do you have a valid California driver's license? (A current motor vehicle report may be required if driving is necessary for the position for which you are applying)							
	Can you provide proof after you are hired that you can legally work in the United States? (If hired, you will be required to submit proof of the legal right to work in the United States.)						
	Can you, with or without accommodation, perform all of the essential functions of the job for which you are applying?						
5. Are	5. Are you a veteran?						
<b>EDUCATION / TRAINING</b>							
1. Name and location of schools (h	nigh school, colle	ge, trade, bus	siness or corresp	ondence)			
NAME	LOCATI	ON	GRADUATE?	SUBJECTS STUDIED	)	DEGREE	
Special Training: List any speci Include trade, vocational, militar					-		
3. Licenses / Certificates: List any licenses or certificates you have which may help to qualify you for the position for which you are applying. Include driver's license, typing steno or software certificates, professional registration, etc.  TITLE STATE NUMBER DATE ISSUED DATE EXPIRES							

Read

Origin: 04.2016 | Revised: 09.2022

Write

## **EMPLOYMENT HISTORY**

List your entire work experience BEGINNING WITH YOUR PRESENT OR LAST JOB. Show promotions as separate jobs. Be sure to include appropriate military experience. If you need additional space, please supply all requested information on a separate sheet and attach to this application.

IMPORTANT: CHECK BOX (□) IF THE JOB GAVE YOU SPECIFIC EXPERIENCE IN THE POSITION FOR WHICH YOU ARE APPLYING.

DATES OF WORK  From  Month Year  To  SUPERVISOR'S NAME  TITLE  Full-Time Part-Time DESCRIBE YOUR DUTIES  May we contact this employer? YES NO  REASON FOR LEAVING  To  Month Year  ADDRESS  REASON FOR LEAVING  To  Month Year  To  Month Year  To  Month Year  Month Year  DESCRIBE YOUR DUTIES  FULL-TIME PHONE #  From  Month Year  YOUR TITLE  DESCRIBE YOUR DUTIES  TITLE  PHONE #  PHONE #  PHONE #  TITLE  PHONE #  ADDRESS  NO  REASON FOR LEAVING  DESCRIBE YOUR DUTIES  PHONE #  PHONE #  ADDRESS  May we contact this employer? YES NO  REASON FOR LEAVING  DESCRIBE YOUR DUTIES  PHONE #  ADDRESS  SUPERVISOR'S NAME  PHONE #  PHONE #  PHONE #  PHONE #  ADDRESS  SUPERVISOR'S NAME  TITLE		
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To SUPERVISOR'S NAME TITLE	ADDRESS ADDRESS	
Month Voor		
YOUR TITLE		
Full-Time Part-Time DESCRIBE YOUR DUTIES		
Hours Per Week		
May we contact this employer?		
YES NO REASON FOR LEAVING	REASON FOR LEAVING	

REFERENCES							
NAME	ADDRESS	PHONE	RELATIONSHIP				

The company may request consumer reports or investigative consumer reports in connection with your application for employment or during the course of your employment (if any), with the company. Any information contained in such reports may be taken into consideration in evaluating your suitability for employment, promotion, reassignment or retention as an employee. Such reports, if obtained, will be prepared by a consumer reporting agency and may contain information concerning your credit standing or worthiness, character, general reputation, personal characteristics, or mode of living. The types of reports that may be requested, include, but are not limited to, credit reports, criminal records checks, court records checks, and/or summaries of educational and employment records and histories. The information contained in such reports may be obtained from public record sources or through personal interviews with your neighbors, friends, associates, current or former employers, or other personal acquaintances.

I certify that the information contained in this application is true and correct and complete to the best of my knowledge and belief. I understand that any false statement, omission or misrepresentation of facts in connection with this application can be cause for rejection of my application, or if I am employed, for my dismissal from employment. I also understand that I am required to abide by all rules and regulations of the Employer.

I hereby understand and acknowledge that if I am employed, my employment relationship with the Employer is of an "at-will" nature, which means that I may resign at any time and the Employer may discharge me at any time, with or without cause. It is further understood that this "at-will" employment relationship may not be changed by any statement or conduct of any person, unless such change is specifically acknowledged in writing and signed by the President/CEO of the Employer.

I acknowledge that no other promises, agreements or representations have been made contrary to this "at-will" employment agreement, and that this agreement, as acknowledged by my signature below, is the full and complete agreement governing the Employer's and my rights and obligations concerning termination of my employment.

Signature of Applicant Date

Applications will be maintained in an active file for a period of 90 days and then transferred to an inactive status for a period of one year from date received.

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, sexual orientation marital or veteran status, physical or mental disabilities, or any other legally protected status.

Origin: 04.2016 | Revised: 09.2022