

"We'll Take Care of It"

EMPLOYMENT APPLICATION

APPLICANT INFORMATION													
Last Name					Fir	rst			M.I.		Date		
Street Address	S									Apartment/Unit #			
City					Sta	itate			ZIP				
Phone				E-1	E-mail Address								
How long have y resided at this a				Date Ava	ilable	?							
Position Applied for													
Have you ever worked for this company?				YES 🗌	NO		If so, under what name?						
Do you have a valid CA Driver's license?			YES	NO		Category, number, Expires							
Do you speak more than one language?				YES 🗌	NO		List languages						
Person to notify in case if an emergency? Name, Address & Phone number.													
EDUCATION													
High School						Addre	ess						
	Did you	d you graduate?]	Degree								
College					Address								
	Did you graduate? YES ☐ NO ☐]	Degree									
Other						Address							
	Did you graduate? YES NO			Degree									
Special Training: List any training you have had which may help to qualify you for the position for which you are applying. Include trade, military, etc. Indicate type of training, where acquired, dates and whether you completed it successfully.													

REFERENCES									
Please list three	professional referen	ces.							
Full Name				Relationship					
Company				Phone					
Address									
Full Name				Relationship					
Company				Phone					
Address	ess								
Full Name				Relationship					
Company				Phone					
Address									
PREVIOUS EN	MPLOYMENT			I					
Company				Phone					
Address			T	Supervisor					
Job Title	Job Title								
Responsibilities									
From	To Reason for Leaving								
May we contact	May we contact your previous supervisor for a reference? YES NO								
Company			Phone						
Address			Supervisor						
Job Title			,						
Responsibilities									
From	То	Reason for Leaving	J						
May we contact your previous supervisor for a reference? YES NO									
Company			Phone						
Address			Supervisor						
Job Title									
Responsibilities					'				
From	То	Reason for Leaving	I						
May we contact your previous supervisor for a reference? YES NO									

MILITARY SERVICE							
Branch							
Rank at Discharge							
Are you currently a member of the National Guard or Reserve?							
Any job offer which may be made may require or be made contingent upon you being able to pass a physical examination.							
Are you over 18 years of age?	YES 🗆	NO 🗆					
Can you after employment submit a work permit if under age 18?	YES	NO 🗆					
Are you authorized to work lawfully in the US?	YES	NO 🗆					
Can you provide proof after you are hired that you can lawfully work in the US? (If hired, you will be required to provide documentation)	YES	NO 🗆					
DISCLAIMER AND SIGNATURE							
I certify that all information contained in this application for employment is true and complete. Any incorrect or misleading statement(s) will render this application void. I understand that this application will remain in effect in effect for 90 days from the date it is submitted. I must renew my application to be considered for other job openings after 90 days. I understand that completion of this application does not constitute an offer or promise of employment. I authorize the Company to contact my references and former employers listed above and understand that, as a condition of employment, the Company will require completion of a drug screen and background check at the company's expense, in compliance with the Company's pre-employment screening policies. I have or will provide a background investigation release form which contains the disclosures under the Fair Credit Reporting Act and my authorization and general release to conduct the screening under the FCRA, which I have read/will read before signing. In the event that I am hired for a position, I shall comply with all Company policies and procedures. I understand and agree that any misrepresentation, omission or false statement that I make in this application will be sufficient cause for the Company to withdraw any offer of employment and/ or terminate my employment.							
If hired, I understand that I will be an at-will employee, meaning my employment can be t and for any reason, or for no reason.	erminated by me or the	e Company at any time					

Date

Signature