



EMPLOYMENT APPLICATION 280 West Bonita Ave. Pomona, CA 91767

This company is an equal opportunity employer and fully subscribes to the principles of Equal Employment Opportunity. It is the policy of this company to provide employment, compensation and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status or disability, or any other basis prohibited by federal or state law. As an equal opportunity employer, this company intends to comply fully with all federal and state laws and the information requested on this application will not be used for any purpose prohibited by law. Disabled applicants may request any needed accommodation.

PLEASE PRINT PLAINLY—BE SURE TO SIGN THIS APPLICATION

Date: _____

Name: _____
Last First Middle

Address _____
No. Street City State Zip

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

Have you been previously employed by this company? Yes No

If yes, when? _____ In what capacity? _____

Who referred you to this company: Our Advertisement Job Service No One
 Employment Agency Friend/Relative (list) _____

EMPLOYMENT DESIRED

Position(s) applied for _____ Full time Summer Help

Date available to start _____ Salary requirement _____

PERSONAL DATA

Are you a United States citizen or do you have an entry permit which allows you to lawfully work in the U.S.? Yes No

Are you at least 18 years old? Yes No



EDUCATION

<u>Name and Location of School</u>	<u>No. Years Completed</u>	<u>Did You Graduate</u>	<u>Subjects Studied</u>
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High School _____

College _____

Other _____

List any special skills or qualifications which you feel are relevant to the job for which you are applying:

MILITARY

Branch _____

What were your duties? _____

Did you receive any specialized training? Yes No

If yes, describe _____



EMPLOYMENT HISTORY

Please give accurate and complete information. Start with present or most recent employer:

May we communicate with your present employer? Yes No

Company Name _____ Telephone No. _____

Address _____ Employed from ____/____/____ to ____/____/____

Name of Supervisor _____

Position and Responsibilities _____

Reason for Leaving _____

Company Name _____ Telephone No. _____

Address _____ Employed from ____/____/____ to ____/____/____

Name of Supervisor _____

Position and Responsibilities _____

Reason for Leaving _____

Company Name _____ Telephone No. _____

Address _____ Employed from ____/____/____ to ____/____/____

Name of Supervisor _____

Position and Responsibilities _____

Reason for Leaving _____



REFERENCES

List three people (no relatives) you have worked with, that you do not live with and whom we may contact for a reference. If not applicable, list three school or personal references that are not related to you.

Name	Title	Phone	Years Known
Name	Title	Phone	Years Known
Name	Title	Phone	Years Known

Please read the following statements carefully before you sign your name.

“I HEREBY CERTIFY that the answers given by me to the above questions and statements are true and correct and hereby authorize you to contact references, past or present employers, persons, schools, law enforcement agencies and any other sources of information which may be relevant to my application for employment.* It is understood and agreed that any misrepresentation, false statement, or omissions by me in this Application will be sufficient reason for rejection of my application or for dismissal at any time during my employment, without liability to this Company. This includes furnishing a false name or social security number. I have read, understand and agree to the above statement. (Please initial here). _____

I further understand that no representative of the Company has the authority to enter into any agreement for employment for any specified period of time and that this Company is not guaranteeing employment for anyone. No employment contract is created by virtue of my being hired by this Company, and, if hired, my employment will be at will and may be terminated at any time without prior notice. I have read, understand and agree to the above statement. (Please initial here). _____

If employed, I agree to abide by all of the work and safety rules of the Company. I understand that this Company is committed to maintaining a drug-free workplace. I am aware that the Company may require a drug test as a part of the hiring process. Also, if employed, I realize that the Company conducts post-accident, reasonable suspicion, periodic and/or random drug and/or alcohol testing of its employees. I have read, understand and agree to the above statement. (Please initial here). _____

I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks pertinent to the job. I also understand that, if offered a position, it may be conditioned on the results of a physical examination. (Please initial here). _____

I understand that this application will remain on file for 60 days for consideration. After 60 days, if I am still interested in a position with this Company, it will be necessary for me to complete a new application form.”

SIGN HERE _____ DATE _____

DO NOT WRITE BELOW – FOR OFFICE USE ONLY 9/12

Hired (Date) for department: _____ For Position: _____

Salary Wage: _____ Will Report: _____

APPROVED 1: _____ Date: _____

APPROVED 2: _____ Date: _____