EMPLOYMENT APPLICATION

Conditions of employment are stated at the end of this form. Please read carefully before you sign this application (Application must be completed in full even if attaching a resume.)

POSITION APPLIED FOR	POSITION APPLIED FOR DESIRED SALARY				
DATE OF APPLICATION DATE AVAILABLE					
Full Name:		AKA	<u>.</u>		
Current Address: How Long:			/ Long:		
Past Address: How Long:			/ Long:		
Home Telephone:	Cell: Email:				
GENERAL INFORMATION					
Are you less than 18 years of age? (If yes, you will need	d to present a work permit.)		Ye	es	No
Do you have reliable means to transportation?			Ye	es	No
Do you have a valid driver's license?			Ye	es	No
Are you legally eligible for employment in the United Sta	ates? (Proof will be required.)		Ye	es	No
Have you ever been discharged from any employment of	or asked to resign? If yes, please explain	under "Information."	Ye	es	No
Do you have any family members and/or friends at this	company? If so, please list under "Inforr	nation."	Ye	es	No
Were you referred to this position by anyone? If so, ple	ase list under "Information."		Ye	es	No
Have you ever been convicted of a criminal offense – felony or serious misdemeanor in the last 7 years? If yes, list nature of crimes, when and where convicted and disposition of the case under "Information."					No
Are you able to perform the essential functions of the job that you are applying for? List any reasonable accommodations needed under "Information."					No
Are you able to work overtime?					No
Have you worked at this company before? If yes, provide job title, location and dates of employment under "Information."					No
EDUCATION & SKILLS					
NAME OF SCHOOL C	ITY & STATE	GRADE OR DEGREE COM	MPLETED	DID YOU	GRADUATE?
Do you have any special licenses, certificates or special training? If so, please list under "Special."					No
Are you trained to drive a forklift? If so, indicate the type of fork lift you've driven under "Special."					No
Do you have any special skills not listed that are relevant to this position? If so, please list under "Special."					No
Are you proficient with Microsoft Word and Excel?				es	No
Are you computer literate? If so, list software knowledge under "Special."				es	No
Special:					

EMPLOYMENT HISTORY

1 EMPLOYER	FR	ОМ	TO		JOB TITLE		
	MO	YR	MO	YR			
NAME OF COMPANY					DESCRIBE YOUR	RDUTIES	
ADDRESS	STARTING SALARY: \$						
ELEPHONE	ENDING SALARY: \$						
IAME & TITLE OF IMMEDIATE SUPERVISOR	REASON FOR	REASON FOR LEAVING			1	MAY WE CONTACT YOUR EMPLOYER?	
2 EMPLOYER	FR	FROM TO		TO JOB TITLE			
	MO	YR	MO	YR			
NAME OF COMPANY					DESCRIBE YOUR	RDUTIES	
ADDRESS	STAR	TING SALARY:	\$		_		
ELEPHONE	ENDING SALARY: \$						
NAME & TITLE OF IMMEDIATE SUPERVISOR	REASON FOR LEAVING				MAY WE CONTACT YOUR EMPLOYER?		
3 EMPLOYER	FR	FROM TO		JOB TITLE			
	MO	YR	MO	YR			
IAME OF COMPANY					DESCRIBE YOUR	RDUTIES	
ADDRESS	STAR	STARTING SALARY: \$					
TELEPHONE	ENI	ENDING SALARY: \$					
NAME & TITLE OF IMMEDIATE SUPERVISOR	REASON FOR LEAVING		MAY WE CONTACT YOUR EMPLOYER?				

NAME:	BUSINESS NAME:	PHONE NUMBER / EMAIL	YEARS AQUAINTED

PLEASE READ CAREFULLY AND SIGN BELOW:

HRIDEAS.COM 925.556.4404

I certify that all answers given by me are true, accurate and complete, I understand that the falsification, misrepresentation or omission of fact on this application (or any other accompanying or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered. . I further certify that I, the undersigned applicant, have personally completed this application.

It is the policy of the company to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, gender bias, national origin, marital status, expunged juvenile records, or pregnancy, and any and other characteristic protected by Federal, State or Local law.

I authorize the investigation of all statements and information contained in this application. I authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. California Only: Applicants may omit any convictions for the possession of Marijuana that are more than two (2) years old, and any information or referral to, and participation in, pretrial or post trial diversion program.

I understand that nothing contained in the application, or conveyed during any interview which maybe granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is at will, for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me.

Date