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8975 Complex Dr. San Diego, CA 92123, (858) 292-8100

APPLICATION FOR EMPLOYMENT

To Applicant: We appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications and may assist us in possible future upgrading.

PERSONAL DATA

(Please Print)

NAME _____ DATE _____
FIRST MIDDLE LAST

ADDRESS _____
CITY STATE ZIP

TELEPHONE _____ DRIVER'S LICENSE #, & STATE _____ SOCIAL SECURITY NUMBER _____

ARE YOU 18 YEARS OF AGE OR OLDER? _____ YES _____ NO _____

Full Time		/ Part Time		AM / PM		
M	Tu	W	Th	F	Sat	Sun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WHAT POSITION ARE YOU APPLYING FOR? _____

IF YOUR APPLICATION IS CONSIDERED FAVORABLY, ON WHAT DATE WILL YOU BE AVAILABLE? _____

PAY RATE DESIRED: _____ IF REQUIRED, ARE YOU AVAILABLE TO WORK OVERTIME? _____ YES _____ NO

HAVE YOU EVER PLEADED GUILTY, NO CONTEST OR BEEN CONVICTED OF A CRIME? YES NO IF YES, GIVE DATES AND DETAILS: _____

ANSWERING YES TO THESE QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC REJECTION FOR EMPLOYMENT. DATE OF THE OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION, REHABILITATION AND POSITION APPLIED FOR WILL BE CONSIDERED.

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.? _____ YES _____ NO _____
(PROOF OF U.S. CITIZENSHIP, OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT)

RECORD OF EDUCATION

EDUCATION	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
ELEMENTARY SCHOOL				
JUNIOR/HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS, OR CORRESPONDENCE SCHOOL				

Please specify any other relevant experience, skills or qualifications: _____

Subjects of special study or research work: _____

List below all present and past employment, beginning with your most recent

Name and Address of Company and Type of Business	FROM		TO		Starting Salary	Last Salary	Reason for leaving:
	Mo.	Yr.	Mo.	Yr.			
							Supervisor's name:
	Position:						
	Duties:						
Telephone:							

Name and Address of Company and Type of Business	FROM		TO		Starting Salary	Last Salary	Reason for leaving:
	Mo.	Yr.	Mo.	Yr.			
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Telephone:							

Name and Address of Company and Type of Business	FROM		TO		Starting Salary	Last Salary	Reason for leaving:
	Mo.	Yr.	Mo.	Yr.			
							Supervisor's name:
	Position:						
	Duties:						
Telephone:							

IF THERE IS ANY PARTICULAR EMPLOYER(S) ON THE LIST THAT YOU DO NOT WISH US TO CONTACT, PLEASE INDICATE WHICH ONE(S):

PERSONAL REFERENCES (List three people not related to you, whom you have known for at least one year)

Name and Occupation	Address	Phone Number

In Case of Emergency Notify:

Name	Address	Phone Number
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"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU. I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE."

Date _____ Name _____ Signature _____