

APPLICATION FOR EMPLOYMENT

APPLICATIONS ARE CONSIDERED WITHOUT REGARD TO RACE, ETHNICITY, RELIGION, SEX, SEXUAL ORIENTATION, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, DISABILITY, THE PRESENCE OF A NON-JOB-RELATED MEDICAL CONDITION OR HANDICAP, OR ANY OTHER CHARACTERISTIC PROTECTED BY APPLICABLE STATE OR FEDERAL CIVIL RIGHTS LAWS.

PERSONAL INFORMATION

POSITION APPLIED FOR

DATE OF APPLICATION

LAST NAME

FIRST NAME

MIDDLE NAME

STREET

CITY

ZIP

HOME PHONE

MOBILE PHONE

EMAIL

DRIVER'S LICENSE NUMBER

ISSUING STATE

SSN

OR

EARLIEST AVAILABLE START DATE

MINIMUM NOTICE REQUIRED AT CURRENT JOB

TYPE OF EMPLOYMENT SOUGHT:

FULL TIME

PART TIME

TEMPORARY

HAVE YOU EVER WORKED FOR THIS COMPANY BEFORE?

YES NO

MAY WE CONTACT YOUR CURRENT EMPLOYER?

YES NO

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION FOR WHICH YOU ARE APPLYING, EITHER WITH OR WITHOUT REASONABLE ACCOMMODATIONS?

YES NO

DO YOU HAVE THE LEGAL RIGHT TO WORK AND BE EMPLOYED IN THE U.S.?

YES NO

(PROOF OF IDENTITY AND LEGAL AUTHORITY TO WORK IN THE U.S. IS A CONDITION OF EMPLOYMENT:)

ARE YOU AT LEAST AGE 18?

YES NO

(PROOF OF AGE AND WORK PERMITS MAY BE REQUIRED PRIOR TO HIRING)

DO YOU HAVE A RELIABLE MEANS OF TRANSPORTATION?

YES NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A TRAFFIC VIOLATION?

YES NO

(NOTE: PLEASE EXCLUDE MISDEMEANOR CONVICTIONS FOR MARIJUANA-RELATED OFFENSES MORE THAN TWO YEARS OLD; CONVICTIONS THAT HAVE BEEN SEALED, EXPUNGED, OR LEGALLY ERADICATED; AND MISDEMEANOR CONVICTIONS FOR WHICH PROBATION WAS SUCCESSFULLY COMPLETED OR OTHERWISE DISCHARGED AND THE CASE WAS JUDICIALLY DISMISSED. A CONVICTION IS NOT AN AUTOMATIC BAR TO EMPLOYMENT. EACH CASE WILL BE CONSIDERED ON ITS OWN MERITS).

IF YES, PLEASE EXPLAIN AND STATE THE CHARGE, THE COURT, THE DATE OF THE CONVICTION, AND THE DISPOSITION OF THE CASE:

EDUCATION

PLEASE LIST IN REVERSE CHRONOLOGICAL ORDER BEGINNING WITH THE MOST RECENT.

1

NAME OF INSTITUTION _____

NUMBER OF YEARS ATTENDED _____ MONTH/YEAR OF GRADUATION _____ DEGREE (*list any honors or commendations*) _____ MAJOR _____

STREET _____ CITY _____ ZIP _____

2

NAME OF INSTITUTION _____

NUMBER OF YEARS ATTENDED _____ MONTH/YEAR OF GRADUATION _____ DEGREE (*LIST ANY HONORS OR COMMENDATIONS*) _____ MAJOR _____

STREET _____ CITY _____ ZIP _____

3

NAME OF INSTITUTION _____

NUMBER OF YEARS ATTENDED _____ MONTH/YEAR OF GRADUATION _____ DEGREE (*list any honors or commendations*) _____ MAJOR _____

STREET _____ CITY _____ ZIP _____

4

NAME OF INSTITUTION _____

NUMBER OF YEARS ATTENDED _____ MONTH/YEAR OF GRADUATION _____ DEGREE (*LIST ANY HONORS OR COMMENDATIONS*) _____ MAJOR _____

STREET _____ CITY _____ ZIP _____

5

NAME OF INSTITUTION _____

NUMBER OF YEARS ATTENDED _____ MONTH/YEAR OF GRADUATION _____ DEGREE (*list any honors or commendations*) _____ MAJOR _____

STREET _____ CITY _____ ZIP _____

EMPLOYMENT / WORK EXPERIENCE: (MUST BE COMPLETED)

PLEASE LIST IN REVERSE CHRONOLOGICAL ORDER BEGINNING WITH THE MOST RECENT.

1

EMPLOYER		SALARY
FROM (MM/YYYY)	TO (MM/YYYY)	REASON FOR LEAVING
JOB TITLE	SUPERVISOR'S NAME	PHONE
STREET	CITY	ZIP

PLEASE DESCRIBE THE DUTIES & RESPONSIBILITIES OF YOUR POSITION, AS WELL AS YOUR ACCOMPLISHMENTS.

2

EMPLOYER		SALARY
FROM (MM/YYYY)	TO (MM/YYYY)	REASON FOR LEAVING
JOB TITLE	SUPERVISOR'S NAME	PHONE
STREET	CITY	ZIP

PLEASE DESCRIBE THE DUTIES & RESPONSIBILITIES OF YOUR POSITION, AS WELL AS YOUR ACCOMPLISHMENTS.

3

EMPLOYER _____ SALARY _____

FROM (MM/YYYY) _____ To (MM/YYYY) _____ REASON FOR LEAVING _____

JOB TITLE _____ SUPERVISOR'S NAME _____ PHONE _____

STREET _____ CITY _____ ZIP _____

PLEASE DESCRIBE THE DUTIES & RESPONSIBILITIES OF YOUR POSITION, AS WELL AS YOUR ACCOMPLISHMENTS.

PROFESSIONAL REFERENCES

1

NAME _____ PHONE _____

COMPANY _____ TITLE _____

STREET _____ CITY _____ ZIP _____

2

NAME _____ PHONE _____

COMPANY _____ TITLE _____

STREET _____ CITY _____ ZIP _____

3

NAME _____ PHONE _____

COMPANY _____ TITLE _____

STREET _____ CITY _____ ZIP _____

PERSONAL REFERENCES

1

NAME

PHONE

RELATIONSHIP

LENGTH OF ACQUAINTANCE

STREET

CITY ZIP

2

NAME

PHONE

RELATIONSHIP

LENGTH OF ACQUAINTANCE

STREET

CITY ZIP

3

NAME

PHONE

RELATIONSHIP

LENGTH OF ACQUAINTANCE

STREET

CITY ZIP

SPECIAL SKILLS

PLEASE DESCRIBE ANY SPECIAL SKILLS OR QUALIFICATIONS YOU MAY HAVE FOR THIS TYPE OF WORK.

EXTRACURRICULAR

PLEASE DESCRIBE ANY HOBBIES, SPECIAL INTERESTS, AND ACTIVITIES. (PLEASE OMIT THOSE INDICATING RACE, COLOR, RELIGION, NATIONAL ORIGIN, ANCESTRY, AGE, OR THE EXISTENCE OF A DISABILITY.)

LANGUAGES

PLEASE LIST ANY LANGUAGES, BESIDES ENGLISH, THAT YOU SPEAK OR USE INCLUDING ASL.
FOR AN EXPLANATION OF PROFICIENCY LEVELS, REFER TO THE BOTTOM OF THE NEXT PAGE.

1

LANGUAGE _____

NUMBER OF YEARS SPOKEN OR USED _____

- NATIVE / BILINGUAL PROFICIENCY
 FULL PROFESSIONAL PROFICIENCY
 PROFESSIONAL WORKING PROFICIENCY
 LIMITED WORKING PROFICIENCY
 ELEMENTARY PROFICIENCY

2

LANGUAGE _____

NUMBER OF YEARS SPOKEN OR USED _____

- NATIVE / BILINGUAL PROFICIENCY
 FULL PROFESSIONAL PROFICIENCY
 PROFESSIONAL WORKING PROFICIENCY
 LIMITED WORKING PROFICIENCY
 ELEMENTARY PROFICIENCY

3

LANGUAGE _____

NUMBER OF YEARS SPOKEN OR USED _____

- NATIVE / BILINGUAL PROFICIENCY
 FULL PROFESSIONAL PROFICIENCY
 PROFESSIONAL WORKING PROFICIENCY
 LIMITED WORKING PROFICIENCY
 ELEMENTARY PROFICIENCY

AVAILABILITY

PLEASE LIST DAYS AND HOURS YOU ARE AVAILABLE TO WORK:

DAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
FROM:	_____	_____	_____	_____	_____	_____	_____
To:	_____	_____	_____	_____	_____	_____	_____

DECLARATION

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND AGREE TO HAVE ANY OF THE STATEMENTS CHECKED BY THE COMPANY (BACKGROUND CHECK) UNLESS I HAVE INDICATED TO THE CONTRARY. I AUTHORIZE THE REFERENCES LISTED ABOVE, AS WELL AS ALL OTHER INDIVIDUALS WHOM THE COMPANY CONTACTS, TO PROVIDE THE COMPANY ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY OTHER PERTINENT INFORMATION THAT THEY MAY HAVE. FURTHER, I RELEASE ALL PARTIES AND PERSONS FROM ANY AND ALL LIABILITY FOR ANY DAMAGES THAT MAY RESULT FROM FURNISHING SUCH INFORMATION TO THE COMPANY AS WELL AS FROM ANY USE OR DISCLOSURE OF SUCH INFORMATION BY THE COMPANY OR ANY OF ITS AGENTS, EMPLOYEES, OR REPRESENTATIVES. I UNDERSTAND THAT ANY MISREPRESENTATION, FALSIFICATION, OR MATERIAL OMISSION OF INFORMATION ON THIS APPLICATION MAY RESULT IN MY FAILURE TO RECEIVE AN OFFER OR, IF I AM HIRED, MY IMMEDIATE DISMISSAL FROM EMPLOYMENT.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE RULES AND STANDARDS OF THE COMPANY. I FURTHER AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED AT WILL, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, EITHER AT MY OPTION OR AT THE OPTION OF THE COMPANY. I UNDERSTAND THAT NO EMPLOYEE OR REPRESENTATIVE OF THE COMPANY, OTHER THAN ITS PRESIDENT, HAS THE AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY EXPRESS OR IMPLIED AGREEMENT CONTRARY TO THE FOREGOING. FURTHER, THE PRESIDENT OF THE COMPANY MAY NOT ALTER THE AT-WILL NATURE OF THE EMPLOYMENT RELATIONSHIP OR ENTER INTO ANY EMPLOYMENT AGREEMENT FOR A SPECIFIED TIME UNLESS THE PRESIDENT AND I BOTH SIGN A WRITTEN AGREEMENT THAT CLEARLY AND EXPRESSLY SPECIFIES THE INTENT TO DO SO. I AGREE THAT THIS SHALL CONSTITUTE A FINAL AND FULLY BINDING INTEGRATED AGREEMENT WITH RESPECT TO THE AT-WILL NATURE OF MY EMPLOYMENT RELATIONSHIP AND THAT THERE ARE NO ORAL, WRITTEN, OR COLLATERAL AGREEMENTS REGARDING THIS ISSUE.

I ALSO UNDERSTAND THAT ALL OFFERS OF EMPLOYMENT ARE CONDITIONED ON THE COMPANY'S RECEIPT OF SATISFACTORY RESPONSES TO REFERENCE REQUESTS, BACKGROUND CHECKS AND THE PROVISION OF SATISFACTORY PROOF OF AN APPLICANT'S IDENTITY AND LEGAL AUTHORITY TO WORK IN THE UNITED STATES. OFFERS OF EMPLOYMENT ARE ALSO CONDITIONED ON THE SATISFACTORY COMPLETION OF A POST-OFFER MEDICAL EXAMINATION.

ARBITRATION

ANY DISPUTES ARISING OUT OF OR RELATING TO THE EMPLOYMENT APPLICATION PROCESS OR TO EMPLOYMENT/DENIAL OF EMPLOYMENT SHALL BE ARBITRATED BY BINDING ARBITRATION BEFORE EITHER JAMS OR ADR SERVICES IN SAN FRANCISCO COUNTY, CALIFORNIA. SUCH ARBITRATION SHALL INCLUDE ANY CLAIMS YOU HAVE AGAINST THE COMPANY OR ANY OF ITS OWNERS, MANAGERS, DIRECTORS, SUPERVISORS OR AGENTS. YOU ALSO KNOWINGLY AND VOLUNTARILY WAIVES (GIVES UP) THE RIGHT TO BE A PARTY IN OR TO ANY CLASS ACTION LAWSUIT AGAINST THE COMPANY WHETHER FILED IN FEDERAL OR STATE COURT, AS PART OF ITS AGREEMENT TO ARBITRATE BY BINDING ARBITRATION ALL DISPUTES WITH YOU.

YOU STILL HAVE THE RIGHT TO FILE ADMINISTRATIVE CLAIMS WITH THE EEOC, THE DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING ("DFEH"), THE DLSE, UNDER THE NATIONAL LABOR RELATIONS ACT (IF APPLICABLE) AND BEFORE ANY OTHER GOVERNMENTAL AGENCY AS PROVIDED BY LAW. HOWEVER, CLAIMS FOR DAMAGES YOU SEEK TO PURSUE IN THE COURTS BASED UPON RIGHTS CONTAINED IN TITLE VII (ENFORCED BY THE EEOC), IN THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT (ENFORCED BY THE DFEH), OR IN OTHER FEDERAL OR STATE STATUTES ARE COVERED BY THIS AGREEMENT AND ARE REQUIRED TO BE RESOLVED BY BINDING ARBITRATION, AS ARE ALL OTHER DISPUTES LISTED ABOVE.

THIS BINDING ARBITRATION SHALL BE CONDUCTED BY A RETIRED JUDGE OR SUCH OTHER PERSON AS JOINTLY SELECTED BY THE PARTIES, AND THE PROCEDURE GOVERNED BY THE FEDERAL ARBITRATION ACT (9 U.S.C. SECTIONS 1-16). ALL PARTIES SHALL HAVE ALL RIGHTS OF DISCOVERY AND REMEDIES AS THEY WOULD IN A CALIFORNIA CIVIL ACTION. THE ARBITRATION OF ALL ISSUES, INCLUDING DAMAGES (IF APPLICABLE) SHALL BE FINAL AND BINDING UPON THE ALL PARTIES TO THE EXTENT PERMITTED BY LAW. JUDGMENT UPON THE AWARD MAY BE ENTERED BY ANY COURT HAVING JURISDICTION. THE PARTIES SHALL EACH INITIALLY BEAR THEIR OWN COSTS AND ATTORNEYS FEES. THE COMPANY SHALL PAY FOR THE ARBITRATOR'S FEES AND ANY OUT-OF-POCKET COSTS REQUIRED FOR THE ADMINISTRATION OF THE ARBITRATION (SUCH AS ROOM RENTAL CHARGES). THE ARBITRATOR SHALL ISSUE A WRITTEN DECISION EXPLAINING THE REASONS FOR THE DECISION. THE ARBITRATOR SHALL FOLLOW THE APPLICABLE LAW IN DETERMINING WHETHER TO AWARD ATTORNEYS' FEES AND COSTS TO THE PREVAILING PARTY.

IF ANY PORTION OF THIS ARBITRATION AGREEMENT IS HELD INVALID OR UNENFORCEABLE, THE REMAINDER SHALL STILL BE VALID AND ENFORCEABLE. THE ARBITRATOR AND/OR SUPERVISING COURT SHALL BOTH HAVE THE POWER TO AMEND THE ARBITRATION PROCEDURES SET FORTH HEREIN SO THIS AGREEMENT SHALL REMAIN ENFORCEABLE AND BINDING. ANY ARBITRATION PROCEEDING MUST BE INSTITUTED WITHIN THE SAME TIME AS REQUIRED BY THE STATUTE OF LIMITATIONS IN A CIVIL PROCEEDING FOR THE SAME CLAIMS. THE ARBITRATION PROCEEDING IS INSTITUTED BY MAKING A WRITTEN DEMAND FOR ARBITRATION TO EITHER ADR SERVICES OR TO JUDICIAL ARBITRATION AND MEDIATION SERVICES (JAMS), OR TO THE OTHER PARTY, BY REGISTERED LETTER, RETURN RECEIPT REQUESTED.

I ALSO UNDERSTAND THAT THIS APPLICATION CONTAINS A PROVISION FOR MANDATORY ARBITRATION OF DISPUTES, BY WHICH I AM WAIVING (GIVING UP) MY RIGHT TO TRIAL BY JURY.

SIGNATURE OF APPLICANT

DATE

EVALUATION

INVITE FOR INTERVIEW? Yes No

DATE & TIME

VENUE

INTERVIEWER

REMARKS

LANGUAGE PROFICIENCY LEVELS

NATIVE / BILINGUAL PROFICIENCY

- has a speaking proficiency equivalent to that of an educated native speaker.
- has complete fluency in the language, such that speech on all levels is fully accepted by educated native speakers in all of its features, including breadth of vocabulary and idiom, colloquialisms, and pertinent cultural references.

FULL PROFESSIONAL PROFICIENCY

- able to use the language fluently and accurately on all levels normally pertinent to professional needs.
- can understand and participate in any conversations within the range of own personal and professional experience with a high degree of fluency and precision of vocabulary.
- would rarely be taken for a native speaker, but can respond appropriately even in unfamiliar situations.
- makes only quite rare and unpatterned errors of pronunciation and grammar.
- can handle informal interpreting from and into the language.

PROFESSIONAL WORKING PROFICIENCY

- able to speak the language with sufficient structural accuracy and vocabulary to participate effectively in most conversations on practical, social, and professional topics.
- can discuss particular interests and special fields of competence with reasonable ease.
- has comprehension which is quite complete for a normal rate of speech.
- has a general vocabulary which is broad enough that he or she rarely has to grope for a word.
- has an accent which may be obviously foreign; has a good control of grammar; and whose errors virtually never interfere with understanding and rarely disturb the native speaker.

LIMITED WORKING PROFICIENCY

- able to satisfy routine social demands and limited work requirements.
- can handle with confidence most basic social situations including introductions and casual conversations about current events, work, family, and autobiographical information.
- can handle limited work requirements, needing help in handling any complications or difficulties; can get the gist of most conversations on non-technical subjects (i.e. topics which require no specialized knowledge), and has a speaking vocabulary sufficient to respond simply with some circumlocutions.
- has an accent which, though often quite faulty, is intelligible.
- can usually handle elementary constructions quite accurately but does not have thorough or confident control of the grammar.

ELEMENTARY PROFICIENCY

- can fulfill travelling needs and conduct themselves in a polite manner.
- able to use questions and answers for simple topics within a limited level of experience.
- able to understand basic questions and speech, which allows for guides, such as slower speech or repetition, to aid understanding.
- has only a vocabulary large enough to communicate the most basic of needs; also makes frequent punctuation and grammatical mistakes in writing of the language.
- able to perform most basic functions using the language, including buying goods, reading the time, ordering simple meals and asking for minimal directions.