

APPLICATION FOR EMPLOYMENT



Corporate Offices
1120 Joshua Way
Vista, California 92081
800-799-7373
www.certifiedfolder.com

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For		Date of Application									
How Did You Learn About Us? <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Inquiry <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other _____											
Last Name		First Name		Middle Name							
Address		Number		Street		City		State		Zip Code	
Telephone Number(s)						Social Security Number (voluntary)					

Best time to contact you at home is: : ^{AM}/_{PM}

If you are under 18 years of age, can you provide required proof of your eligibility to work? ☐ Yes ☐ No

Have you ever filed an application with us before? If Yes, give date ☐ Yes ☐ No

Have you ever been employed with us before? If Yes, give date ☐ Yes ☐ No

Do any of your friends or relatives, other than spouse, work here? ☐ Yes ☐ No

If Yes, state name, relationship and location _____

Are you currently employed? ☐ Yes ☐ No

May we contact your present employer? ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ☐ Yes ☐ No

Proof of citizenship or immigration status will be required upon employment. ☐ Yes ☐ No

Date available for work _____ What is your desired salary range? _____

Are you available to work: ☐ Full Time (Please indicate 1 2 3 shift)
☐ Part Time (Please indicate Mornings Afternoon Evenings)
☐ Temporary (Please indicate dates available _____ - _____)

Are you currently on "lay-off" status and subject to recall? ☐ Yes ☐ No

Can you travel if a job requires it? ☐ Yes ☐ No

EDUCATION

School	Name and Address of School	Course of Study	Number of Years Completed	Diploma / Degree
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

ADDITIONAL INFORMATION

State any additional information you feel may be helpful to us in considering your application, including any job related training in the U.S. Military.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation? _____ YES _____ NO

WE ARE AN EQUAL OPPORTUNITY EMPLOYER