



## Employment Application

APPLICANT INFORMATION					
Last Name		First		M.I.	Birth Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No.		Desired Wage	
Position Applied for					
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Are you vaccinated for Covid-19?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, are you boosted?	
EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
REFERENCES					
<i>Please list two professional references.</i>					
Full Name			Relationship		
Company			Phone (     )		
Address					
Full Name			Relationship		
Company			Phone (     )		
Address					
Full Name			Relationship		
Company			Phone (     )		
Address					

PREVIOUS EMPLOYMENT		
Company		Phone (     )
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company		Phone (     )
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company		Phone (     )
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>		

LANGUAGES
Are you bilingual? Explain your proficiency in each language (read, write, understand, etc.).

MILITARY SERVICE	
Branch	From                      To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge and hereby authorize California West to verify this information.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date