

980 Rock Avenue San Jose, CA 95131 Telephone: (408) 503-8000/Fax: (408) 503-8047

Requisition Number: _____

HOW DID YOU FIND US? (Circle one) Company Website, Craigslist, LinkedIn, CalJobs, San Jose State University, Monster, San Jose Mercury, World Journal Newspaper, Referral, Other:

EMPLOYMENT APPLICATION PERSONAL INFORMATION

PERSONAL INFORMATION			Date of Application:			
Legal Birth Name:Last			First		Middle	
Preferred Name:						
Present Address	:		<u>State</u>		How long have you lived there?	
	Street and Number	City	State	Zip Code		
Prior Address: _					How long did you live there?	
	Street and Number	City	State	Zip Code		
Phone: Home: (_)	Other: ()	E-ma	ail:	
Position you are	applying for:			Salary/wage des	sired:	
Referred by:				Date you can sta	art:	
Have you ever w	vorked for this Company	before?	Yes [] No	[] If Yes, whe	n?:	
Do you have any	y relatives that work/ed f	or this Company	? Yes [] No	[] If Yes, pleas	se name:	
Are you over 18	years of age? Yes []	No []	It	No, can you sub	omit a work permit? Yes [] No []	
If hired, can you	submit verification of y	our legal right to	work in the Un	ited States? Yes	[] No []	
	of satisfactorily perform mmodation? Yes []]		job duties requi	red of the positio	on you are applying for, with or without	
					er's license? Yes [] No [] purposes)? Yes [] No []	
	leaded guilty or "no con ate the offense, conviction	n date, confinen		nd any other rele		
					ment. Factors such as age and time of the nt. In answering this question, do not include	

offense, seriousness and nature of the violation, and rehabilitation will be taken into account. In answering this question, do not include minor traffic infractions, convictions for which the record has been sealed or expunged, any conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed, referrals to and participation in any pre-trial or post-trial diversion programs, and marijuana-related offenses that occurred over two years ago.

EDUCATIONAL HISTORY

Include all schools, colleges & other educational programs attended. (Attach extra sheets if needed.) Please do not use "See Resume."

School Name, City, State	Years	Diploma/Degree	Course of Study or Major	Specialized Training,	
	Completed			Experience, Skills & Extra-	
	(Circle one)			Curricular Activities	
High School:	9 10 11 12				
College/University:	1 2 3 4				
Graduate/Professional:	1 2 3 4				
Apprenticeship/Technical:					
Other:					

PREVIOUS EMPLOYMENT HISTORY

Account for <u>all</u> periods of time, including military service and any period of unemployment. (Attach extra sheets if needed.) Please do not use "See Resume."

Present or Last Employer	Employed From (mo/yr) To (mo/yr)	Wage/Salary Start \$ Final \$	Your Title or Position Supervisor' Name/ Title	Exact Reason for Leaving
Previous Employer 1 Address City, State, Zip Code Telephone	Employed From (mo/yr) To (mo/yr)	Wage/Salary Start \$ Final \$	Your Title or Position Supervisor' Name/ Title	Exact Reason for Leaving
Previous Employer 2 Address City, State, Zip Code Telephone	Employed From (mo/yr) To (mo/yr)	Wage/Salary Start \$ Final \$	Your Title or Position Supervisor' Name/ Title	Exact Reason for Leaving

PREVIOUS EMPLOYMENT HISTORY (Continued)

May we contact your current employer?	? []Yes	[] No.	If No, please expla	in:
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Have you ever been terminated or asked to resign from any job? [] Yes [] No If Yes, please explain: _____

Please explain any gaps in your employment history: _____

PROFESSIONAL AND ACADEMIC REFERENCES (Please list persons who know you well preferably people you worked with and/or manager <u>NO FRIENDS OR RELATIVES</u>.)

Name	Occupation	Address (Street, City and State)	Telephone No.	Years Known

ADDITIONAL INFORMATION

Please submit any additional information that you would like us to consider: _____

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I authorize the employer to contact and obtain information about me from previous employers, educational institutions and "references" I provided, and any other party necessary to verify the accuracy of information I disclosed in this application, a related employment resume or a personal interview. To assist in the processing of my application, I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose.

This application will expire in 30 days. After that date, unless otherwise notified, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement. If I accept an offer of employment I understand the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than an executive officer of the employer, has authority to enter into any employment agreement with terms contrary to the foregoing and then only in writing signed by such officer.

I fully understand and accept all terms and conditions in the above statement.

Date

Applicant's Signature