

EMPLOYMENT APPLICATION

145 Middlefield Court • Brentwood • CA • 94513
 Phone (925) 634-5552 • Fax (925) 634-5685 • License #470191
www.precisioncabinets.com • Equal Opportunity Employer

_____ Pursuant to State Law: We have an Employment-At-Will Agreement in California _____

A PRE-EMPLOYMENT DRUG TEST IS REQUIRED

- Please complete ALL sections as thoroughly as possible, even if you are attaching a resume. It is necessary to provide complete information, as this will be used to determine eligibility.

PERSONAL INFORMATION

Today's Date: _____

Last Name: _____ First Name: _____ Middle: _____

Present Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Are you 18 years of age or Older? Yes No Email: _____

ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES? Yes No

POSITION INFORMATION (Please Mark the Box That You Are Most Interested In?)

Position applying for: Office Sales Design / Engineering Customer Service Accounting
 Manufacturing Plant Finishing Cabinetmaker Delivery Installation Other: _____

On what date would you be available to start work: _____

Are you currently employed? Yes No Date of last employment: _____

Have you applied to this company before? Yes No If YES, When? _____

Have you worked for this company before? Yes No When? _____ Supervisor? _____

If YES, reason for leaving: _____

How did you hear about us? Truck Internet Agency Walk-in

Friend: _____ Family: _____ Other: _____

EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	YEAR COMPLETED	DIPLOMA/ DEGREE LEVEL
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

WORK HISTORY

- Beginning with your most recent experience, describe your work history. In the area for "Duties and Skills" describe the major duties and skills acquired/used.

Name of Current or Last Employer: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone: _____ Job Title: _____

Job Start Date: _____ Job End Date: _____

Describe your duties: _____

Reason for leaving: _____

Name of Supervisor: _____ Title: _____

Name of Previous Employer: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone: _____ Job Title: _____

Job Start Date: _____ Job End Date: _____

Describe your duties: _____

Reason for leaving: _____

Name of Supervisor: _____ Title: _____

Name of Previous Employer: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone: _____ Job Title: _____

Job Start Date: _____ Job End Date: _____

Describe your duties: _____

Reason for leaving: _____

Name of Supervisor: _____ Title: _____

PERSONAL REFERENCE

- Reference checks will be conducted to assess your past work performance.
- In addition to the references identified in the "Work History" section, please provide additional references in the spaces below.

Name	Telephone Number	Relationship	No. of Years Known

CAN YOU PERFORM THE PHYSICAL DUTIES OF THE JOB YOU ARE APPLYING FOR? Yes No

If NO, what can be done to accommodate your limitations?

HAVE YOU EVER SERVED IN THE MILITARY? Yes No

Branch of Service: _____

Rank: _____

Entry Date: _____

Discharge Date: _____

ARE YOU A MEMBER OF THE NATIONAL GUARD? Yes No

IN THE LAST 10 YEARS:

HAVE YOU BEEN CONVICTED OF A CRIME? Yes No

ARE YOU CURRENTLY ON PROBATION OR PAROLE? Yes No

If YES, when, where and what was the outcome of the case?

EQUAL EMPLOYMENT OPPORTUNITY POLICY

It is the policy of this employer that applicants for employment are recruited, selected and hired on the basis of individual merit and ability with respect to positions being filled. Applicants are to be recruited, selected and hired without regard to race, religion, sex, age, national origin, color, marital status, pregnancy, handicap, disability or veteran status or any other classification protected by the applicable state or federal employment discrimination laws.

AUTHORIZATION

"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 REFERNCES AND EMPLOYERS 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 THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THIS COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY ANY AUTHORIZED COMPANY REPRESENTATIVE."

DID SOMEONE HELP YOU COMPLETE THIS APPLICATION? YES NO

APPLICANT SIGNATURE

DATE