

Application For Employment

RONALD L. WOLFE & ASSOCIATES
173 Chapel Street
Santa Barbara, CA 93111
Phone: (805) 964-6770

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position (s) Applied for		Date of Application	
How Did You Learn About Us?			
<input checked="" type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> walk-in	
<input checked="" 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	

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? Yes No
If Yes, give date _____

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

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.

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

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

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last 7 years? Yes No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

	Name & Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Indicate any foreign languages you can speak, read and/or write			
	FLUENT	GOOD	FAIR

SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military

Employment Experience

Start with your present or last job, **even if attaching a resume**. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status. ***Please explain any gaps in time between employment.**

Employer	Dates Employed		WORK PERFORMED
	From	To	
Address			
Telephone Number (s)	Hourly Rates/Salary		
	Starting	Final	
Job Title	Supervisor		
Reason for Leaving			
Employer	Dates Employed		

	From	To	WORK PERFORMED
Address			
Telephone Number (s)	Hourly Rates/Salary		
	Starting	Final	
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Employer	Dates Employed		WORK PERFORMED
	From	To	
Address			
Telephone Number (s)	Hourly Rates/Salary		
	Starting	Final	
Job Title	Supervisor		
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience

Specialized Skills

Check Skills/Equipment Operated

<input type="checkbox"/> PC	<input type="checkbox"/> Fax	Production/Mobile	
<input type="checkbox"/> Calculator	<input type="checkbox"/> Excel	Machinery (list):	Other (list):
<input type="checkbox"/> Typewriter	<input type="checkbox"/> Word for Windows	_____	_____
<input type="checkbox"/> Maintenance Skills		_____	_____
List (Attached)			

State any additional information you feel may be helpful to us in considering your application.

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

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.

YES NO

References

1.	()	
(Name)		Phone #
(Address)		
2.	()	
(Name)		Phone #
(Address)		
3.	()	
(Name)		Phone #
(Address)		

Applicants Statement

(Address)

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

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. **By signing this application for employment I authorize the prospective employer to do any type of background check on me including but not limited to criminal, driving, credit, and reference checking.**

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the even of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Date
Driver's License # _____
Date of Birth _____