

APPLICATION FOR EMPLOYMENT



73255 Country Club Drive
Palm Desert, CA 92260
760-346-1611 ext 414

A clear understanding of your background and work history will help us to evaluate your qualifications for employment. Please print and answer each question completely.

PERSONAL INFORMATION

Last Name _____ First Name _____ Initial _____

Street Address _____ City/State/Zip _____ Phone Number _____

ARE YOU LESS THAN 18 YEARS OF AGE? IF HIRED, CAN YOU PROVIDE PROOF OF IDENTITY AND LEGAL AUTHORIZATION TO WORK IN THE U.S.? OTHER NAMES(S) USED FOR EMPLOYMENT OR SCHOOL
IF YES, A WORK PERMIT MAY BE REQUIRED
YES NO YES NO _____

NAME OF RELATIVES AND/OR FRIENDS EMPLOYED IN THIS ORGANIZATION:

REFERRED BY:

HAVE YOU EVER APPLIED TO THIS ORGANIZATION BEFORE? IF YES, GIVE DATE AND POSITION APPLIED FOR
YES NO _____

HAVE YOU EVER BEEN EMPLOYED BY THIS ORGANIZATION IF YES, GIVE DATES OF EMPLOYMENT
YES NO _____

ARE YOU AVAILABLE TO WORK OVERTIME?
YES NO

CAN YOU PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION FOR WHICH YOU ARE APPLYING WITH OR WITHOUT REASONABLE ACCOMODATION? YES NO

EMPLOYMENT INTERESTS

POSITION DESIRED OR AREA OF INTEREST SECOND CHOICE DATE AVAILABLE PAY EXPECTED \$

TYPE OF EMPLOYMENT SEEKING HOURS AVAILABLE
FULLTIME PART TIME TEMP SUMMER DAY AFTERNOON NIGHT

EDUCATION / SKILLS / AWARDS

NAME AND ADDRESS OR SCHOOL OR INSTITUTION MAJOR DEGREES AND / OR DIPLOMAS

HIGH SCHOOL

COLLEGE

OTHER

HONOR OR AWARDS RECEIVED PROFESSIONAL CERTIFICATES OR LICENSE HELD ARE YOU TAKING ANY COURSES NOW

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LIST PEOPLE WE MAY CONTACT WHO ARE QUALIFIED TO EVALUATE WORK CAPABILITIES. DO NOT INCLUDE RELATIVES.

NAME	ADDRESS	CITY/STATE/ZIP	TELEPHONE	OCCUPATION	YEARS KNOWN

EMPLOYMENT HISTORY

GIVE EMPLOYEE RECORD, LISTING CURRENT TO MOST RECENT EMPLOYER FIRST. SHOW UNEMPLOYED OR SELF EMPLOYED PERIODS AND INDICATE DATES AND COMMENT ON EACH PERIOD. INCLUDE PART-TIME OR SUMMER WORK. YOU MAY USE EXTRA SHEETS FOR ADDITIONAL INFORMATION. A RESUME MAY BE USED TO SUPPLEMENT (BUT NOT REPLACE) THIS INFORMATION.

COMPANY NAME (CURRENT OR LAST)	TELEPHONE	JOB TITLE	DATES EMPLOYED (MONTH/YEAR) FROM: TO:
ADDRESS	CITY/STATE/ZIP	TYPE OF BUSINESS	
SUPERVISORS NAME AND TITLE	REASON FOR LEAVING		MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO

DESCRIPTION OF DUTIES

COMPANY NAME (CURRENT OR LAST)	TELEPHONE	JOB TITLE	DATES EMPLOYED (MONTH/YEAR) FROM: TO:
ADDRESS	CITY/STATE/ZIP	TYPE OF BUSINESS	
SUPERVISORS NAME AND TITLE	REASON FOR LEAVING		MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO

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DESCRIPTION OF DUTIES

ACKNOWLEDGEMENT

- I understand that any offer of employment regarding certain job positions may be conditioned on satisfactorily completion of a medical examination and/or drug and alcohol screen. I agree to sign a release of medical information authorization form and to submit to a medical examination and/or drug screen should **Desert Arc** condition my offer of employment upon successful completion of such an examination or screening.
- I certify, under penalty of perjury, that all of the above information is true and complete, and I understand that any misrepresentation, falsification or omission of information may result in the denial of employment or, if hired, may result in termination.
- I authorize **Desert Arc** to contact my former employers, references and any and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools and personal references to give **Desert Arc (without further notice to me)** any and all information about my previous employment and education, along with any other pertinent information they may have.
- I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT HAVING NO SPECIFIC TERM IS BASED UPON MUTUAL CONSENT AND MAY BE TERMINATED AT WILL, WITH OR WITHOUT CAUSE OR NOTICE, BY EITHER PARTY (**DESERT ARC** or me).
- Except as required in the performance of my duties, I understand and agree that I will not at any time during or after my employment use, disclose or disseminate any confidential information or any other information of a secret, proprietary, or generally undisclosed nature relating to **Desert Arc**, or its products, customers, employees, plan or procedures. I agree to deliver to **Desert Arc** any and all copies of confidential information, or other Company property, upon termination of the employment relationship or at any time upon **Desert Arc's** request. I also agree not to solicit clients or employees of the Organization either during my employment or after my employment termination.
- I acknowledge that I have read all of the above statements and that I understand them. In addition, the statements above supersede and replace any prior understandings or discussions I have had with **Desert Arc** and set forth the complete agreement between me and **Desert Arc** regarding these matters.

SIGNATURE

DATE