

Application for Employment



We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap or national origin.

Personal Information

Date: _____

Name:

_____ Last First Middle

Address:

_____ Street City State Zip

Phone No.:

Referred by: _____ Are you 18 years of age or older? Yes No

Are you a citizen of the U.S. or do you have the legal right to be employed in the U.S.? Yes No

Have you ever pled guilty or "no contest" to, or have been convicted of, a misdemeanor or felony? Yes No

If yes, please give the date(s) and details: _____

Have you been convicted of any crime (excluding minor traffic violations) including driving while under the influence of alcohol or drugs?

If yes, state the offense, location, date(s) and disposition _____

NOTE: Answering "Yes" to these questions will not necessarily disqualify you from employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

Do you have the ability, with or without reasonable accommodations, to work overtime or to travel if travel and/or overtime are required by the job for which you are applying? Yes No

If no, please explain _____

Would you be willing and able to relocate? Yes No

Drivers License: _____ State: _____ Type: _____ Currently Valid? Yes No

Employment Desired

Are you seeking Full-time Part-time Temporary or summer employment?

Position: _____ Date you can start: _____ Salary Desired: _____

Are you employed now? Yes No If yes, may we inquire about you at your present employer? Yes No

Have you ever worked for CP-Carrillo, Inc.? Yes No If so, when and how long? _____

How did you learn of CP-Carrillo, Inc. and / or position? _____

Did a CP-Carrillo, Inc. employee refer you? Yes No If so, please name the employee: _____

Are you now, or do you expect to be, working in any other business or job? Yes No If yes, please explain _____

Are there any days or hours you would be unable or willing to work? Yes No If yes, please specify those days or hours you would be unable or unwilling to work _____

Education

	Name and Location of School	Graduate?	Subjects Studied/ Degree(s) Received
Elementary			
Middle School			
High School			
College			
Trade or Business school			

Capability/Reliability

Would you be willing and able to perform all of the tasks required by the position you are applying for? Yes No
If not, explain _____

Do you have adequate transportation to and from work? Yes No

Will you abide by the safety rules of this company? Yes No

Have you ever been disciplined for violating company safety rules or regulations? Yes No
If yes, explain _____

How many days of work have you missed in the last 3 years due to reasons other paid holidays and vacation?

YEAR _____ NUMBER OF DAYS _____

YEAR _____ NUMBER OF DAYS _____

YEAR _____ NUMBER OF DAYS _____

Work History

List below your last four employers, starting with the last one first.

Dates	Name and Address of Employer	Salary	Your Title or Position	Exact Reason for Leaving
From: _____ To: _____				
From: _____ To: _____				
From: _____ To: _____				
From: _____ To: _____				

Have you ever been terminated or asked to resign from any job? Yes No

If yes, please explain circumstances: _____

Please explain fully any gaps in your employment history: _____

Please indicate any actual experience; special training and qualifications that you have which you feel are relevant to the position for which you are applying: _____

Have you ever used another name? Yes No

Is any additional information relative to change of name, use of an assumed name, or nickname necessary to enable a check on your work and educational record? If yes, please explain: _____

Military

Have you ever served in the military? Yes No

Service Branch _____ Date Entered _____

Date Separated _____ Final Rank _____

Personal References

List below three persons who know you well - not previous employers or relatives, whom you have known for at least a year.

Name	Phone/E-mail	Position	Years Acquainted

Affidavit

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application form during any interviews may be grounds for my immediate discharge.

I hereby authorize CP-Carrillo, Inc. to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against these individuals of defamation, invasion of privacy or any other reason because of their statements.

I agree that, if I am employed, I will abide by all the rules and regulations of the company. I understand that the taking of drug and alcohol tests, when given pursuant to company policy are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody at CP-Carrillo, Inc. is authorized to enter into any written or verbal employment contracts with me for any definite period of time, without the express written consent of the President of the Company. I also understand that my employment is "at-will" and may be terminated by myself or by CP-Carrillo, Inc. at any time for any reason or no reason at all, with or without prior notice.

Signature _____

Date _____