

APPLICATION FOR EMPLOYMENT
Pacifica Services, Inc.

We consider applicants for all positions without regard to age, race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, marital status, sexual orientation or sex of any person or any other legally protected status pursuant to CALIFORNIA'S FAIR EMPLOYMENT PRACTICES AND HOUSING ACT, CALIFORNIA LABOR CODE and other relevant federal, state and local laws.

Please Complete and email to: dgonzales@pacificaservices.com Date: _____

Position(s) Applied For: _____

How did you learn about us? : _____

Last Name: _____	First: _____	
Address: _____	Cell #: _____	
City & State: _____	Zip: _____	Home #: _____
Social Security # _____	email: _____	
Are you at least 18 years old? (If under 18, hire is subject to verification that you are of Minimum legal age)..... Yes/No _____		
<i>The Fair Employment and Housing Act prohibits discrimination on the basis of age with respect to individuals who are more than 40 years of age</i>		

Have you ever filed an application with us? Yes / No _____ Date: _____

Have you ever been employed with us? Yes / No _____ Dates: _____

Are you currently employed: Yes/No _____ If yes, may we contact your present employer? _____

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?..... Yes/No _____

Are you Available: Full Time: _____ Part Time: _____
Temporary: _____ Shift Work: _____

What date would you be available for work: _____

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?..... Yes/No _____

Have you ever been convicted of a criminal offense (felony or serious misdemeanor) ?
(Convictions for marijuana related offenses that are more than two years old need not be listed)
Yes/No _____

EMPLOYMENT EXPERIENCE

Start with your current/most recent employment. 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.

Job Title:	From:	To:
Employer:	Reason for leaving;	
Address:	Work Performed:	
City/State/Zip:		
Supervisor's Name:		
Supervisor's Title:		
Phone Number:		
Fax Number		
Salary:		

Job Title:	From:	To:
Employer:	Reason for leaving;	
Address:	Work Performed:	
City/State/Zip:		
Supervisor's Name:		
Supervisor's Title:		
Phone Number:		
Fax Number		
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Fax Number		
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Employer:	Reason for leaving;	
Address:	Work Performed:	
City/State/Zip:		
Supervisor's Name:		
Supervisor's Title:		
Phone Number:		
Fax Number		
Salary:		

*If you need additional space; please continue on a separate piece of paper
Please **attach** a copy of your **Project History** identifying size, type, value, scope, etc. with this application*

EDUCATION

	Name & Address Of School	Course of Study	Years completed	Diploma / Degree
High School				
Trade School				
College: Undergraduate				
Graduate Professional				
Other Specify				

Specialized Skills:
Computer Software:
Licenses :
Certificates:
Professional Affiliations:

JOB RELATED REFERENCES

Name:	Title:
Company:	Phone #:
Address:	Fax #:
City /State/Zip:	Relationship:

Name:	Title:
Company:	Phone #:
Address:	Fax #:
City /State/Zip:	Relationship:

Name:	Title:
Company:	Phone #:
Address:	Fax #:
City /State/Zip:	Relationship:

Additional information you feel may be helpful to us in considering your application

The following information being requested of you is strictly **VOLUNTARY**. You are under no obligation to answer this section of the application; the information is strictly for purposes of providing the U.S. Department of Labor, Employment Standards Administration with statistics regarding our hiring practices:

Ethnicity: _____ Male _____ or Female _____

Military Veteran: Yes _____ No _____ Handicapped: Yes _____ No _____

Vietnam Veteran: Yes _____ No _____

Please Read Carefully, Initial Each Paragraph and Sign Below:

Initials I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned, have personally completed this application. I understand that any omission or misstatement of material fact in this application or on any document used to secure employment shall be grounds for rejection of this application of for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials I hereby authorize Pacifica Services, Inc., to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and further authorize the references that I have listed to disclose to Pacifica Services, Inc. any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initials I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and Pacifica Services, Inc. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may terminated at any time, with or without prior notice, at the option of either myself or Pacifica Services, Inc., and that nor promises or representations contrary to the foregoing are binding on Pacifica Services, Inc. unless made in writing and signed by me and Pacifica Services, Inc.'s designated representative.

Initials Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by Pacifica Services, Inc., I am entitled to copies of any such public records obtained by Pacifica Services, Inc. unless I check the box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above

Signature of Applicant

Date

Please print your name