Cálifornia

Application for Employment

Please Print

Humane Society of San Bernardino Valley 374 W. Orange Show Rd San Bernardino, CA 92408 909-386-1400

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

NameLast First	Applicant ID #
Address	Middle
Telephone # () Street Cellular/Other Phone # (City State ZIP Code) E-mail Address
Position(s) applied for	Date of application/
Referral Source (Please check the appropriate category and list the source.)	
☐ Walk-in	School
Employee	☐ Job Fair
	☐ Staffing Agency
☐ Advertisement Company's Website	Government Employment Agency
Other Internet	Other
If necessary, best time to call you is	Will you work overtime if required?
If you are under 18 and it is required, can you furnish a work permit?	not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law. Yes No Need more information about the job's "essential functions" to respond
If yes, give date(s) and position(s):	Driver's license number required if driving may be required in the job for which you are applying: State
Have you ever been employed here before?	Have you ever been bonded?
Are you legally eligible for employment	related offenses that occurred over two years ago.)
in this country?	
Date available for work	·
What is your desired salary range or hourly rate of pay?	
\$ Per	•
Type of employment desired: Full-Time Part-Time	
☐ Educational Co-Op ☐ Seasonal ☐ Temporary	
Will you relocate if job requires it?	Have you entered into an agreement with any former employer or
Will you travel if job requires it?	other party (such as a noncompetition agreement) that might, in any way, restrict your ability to work for our company? Yes No
If they have been explained to you, are you able to meet the attendance requirements of the position? \square N/A \square Yes \square No	If yes, please explain:

Starting with your most recent employer, provid	Telephone #			•	ù_		. "	
)	Dates employed:		Year i	to	nth Year	
Street address	City	State g						
Starting job title/final job title	<u> </u>							
Immediate supervisor and title (for most recent position held)		May we contact for reference?						
100 C		☐ Yes ☐ No ☐ Later	_					
Why did you leave?		E-mail:	-					
Summarize the type of work performed and job responsibilities.		<u> </u>						_
What did you like most about your position?			4.5					_
What were the things you liked least about the position?			· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·	
What were the timings you liked least about the position:			· ·					
Employer	Telephone #	,	Month Dates employed:	/	Year	to Mo	onth Year	-
Street address	City) · State						
Starting job title/final job title								
Starting for trice/mat jury title			147			14		
Immediate supervisor and title (for most recent position held)		May we contact for reference?	-					
Why did you leave?		Yes No Later						
Summarize the type of work performed and job responsibilities.		E-mail:			•			<u>.</u>
·								
What did you like most about your position?								
What were the things you liked least about the position?							,	-
Employer	Telephone #		Month		Year	м	onth / Year	_
Street address	(City	State	Dates employed:			to		
			1					
Starting job title/final job title			_					
Immediate supervisor and title (for most recent position held)		May we contact for reference?						,
Why did you leave?	, , , , , , , , , , , , , , , , , , , 	Yes No Later						
		E-mail:				,		
Summarize the type of work performed and job responsibilities.			*. *					•
What did you (ike most about your position?	7-10-7-11-17							 :
What were the things you liked least about the position?						1		_
	Telephone #							_
Employer			Month	1	Year	to	lonth / Year	
Employer '	()	Dates employed:	/_				_
Employer Street address	City) State	Dates employed;	/	,	,		
) State	Dates employed:	<i></i>	•			
Starting job title/final job title			Oates employed:	/_		.,		
Starting job title/final job title Immediate supervisor and title (for most recent position held)		State May we contact for reference? Yes \(\sum \) No \(\sum \) Later	Oates employed:	/				
Starting job title/final job title		May we contact for reference?	Oates employed:					
Street address Starting job title/final job title Immediate supervisor and title (for most recent position held)		May we contact for reference? ☐ Yes ☐ No ☐ Later	Oates employed:					

Employment History	(continued)					
Explain any gaps in your emp	ployment, other than	those due to per	sonal illness	, injury or disability		
If not addressed on previous	page, have you ever h	peen fired or ask	ed to resign f	from a job?	`a'	□ Ves □ No
If yes, please explain:				y .	***************************************	🗀 103 🗀 146
n yes, piedse explain		•				
						<u> </u>
Skills and Qualification						
Summarize any special trainin	ng, skills, licenses and/	or certificates the				
		•				
	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
Computer Skills (Check approp						
☐ Word Processing						
☐ Spreadsheet						
☐ Presentation				·		
☐ E-mail		Years:	□Other	·		Years:
References List names and telephone nu				Diploma GED Degree Certification Other Diploma GED Degree Certification Other Diploma GED Degree Certification Other Other Other Other Other Other Other Other Other Other		Major/Minor
If not applicable, list three scl	hool or personal refe	rences who are n Relationsh to You	ot related to	you.		
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Social Security Numb	er					
SS# _	-					
					•	

We will use this information only for employment purposes and make reasonable efforts to safeguard your privacy.

To what job-related organizations (professional, trade, etč.) do you belong? Exclude memberships that would reveal race, color, religion, sex, national origin, genetic information, citizenship, age, mental or phy	eical dicabi	litias vete	ria/mraga
national guard or any other similarly protected status.	31/20(2)(30(0))	uties, vete	
Organization Offices Hi	≥ld		
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List special accomplishments, publications, awards, etc. Exclude information that would reveal race, color, religion, sex, national origin, genetic information, citizenship, age, mental or physical guard or any other similarly protected status.	icat disabil	ities, veter	an/reserve
In your current or a prior job, have you ever written instructions or directions to be followed by employees o	r custom	ers?	
Yes No Not Applicable			
If yes, please explain:			
Is there any other job-related information you want us to know about you?	٠		. 6
Applicant Statement			
I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.			
I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all referemployers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking	me in this a g, gathering	pplication, and using t	resumé or truthful and
non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of from consideration for employment on any basis prohibited by applicable local, state or federal law.			
I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still employment, it will be necessary for me to reapply and fill out a new application.	l wish to be	considered	for
the to resign at any time, with or without cause and with or without prior notice, and the employer reserve employment at any time, with or without cause and with or without prior notice, and the employer reserve employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not concemployment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to may and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the	istitute an a ke any assur	greement or ances to the	contract for
I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that it to complete an I-9 Form in this regard,			s require me
This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purp applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, genetic information, citiz protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color information, citizenship, age, disability, or any other protected status. Examples of prohibited harassment include, but are not limited to, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of dematerials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.	enship, age , religion, n unwelcome rogatory pic protected c	, disability, ational orig physical co tures or oti ategory, Ha	or any other gin, genetic intact, her graphic arassment of
I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient a consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.	ause to (i) e	liminate m	e from furthe
DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT,			
I certify that I have read, fully understand and accept all terms of the foregoing Applicant	Statem	ent.	
Signature of Applicant	Date	,	1



Related Information

This product is designed to provide accurate and authoritative information. However, it is not a substitute for legal advice and does not provide legal opinions on any specific facts or services. The information is provided with the understanding that any person or entity involved in creating, producing or distributing this product is not liable for any damages arising out of the use or inability to use this product. You are urged to consult an attorney concerning your particular situation and any specific questions or concerns you may have.

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