

# Sun Diego Employment Application

OUR EMPLOYMENT POLICY – Equal opportunity for all without discrimination of race, color, creed, sex, age, handicap, or national origin.

Full Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

Address: \_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

When can you start? \_\_\_\_\_

Position Applied for: \_\_\_\_\_ How were you referred to us? \_\_\_\_\_

Are you legally authorized to work in the U.S.?  YES  NO

Have you ever worked for this company?  YES  NO If so, when? \_\_\_\_\_

Have you ever been convicted of a felony?  YES  NO If yes, explain: \_\_\_\_\_

Do you have any physical condition or handicap which may limit your ability to perform the job applied for?  YES  NO  
(Disclosing this information is voluntary and will be kept confidential)

If yes, what can be done to accommodate your limitation? \_\_\_\_\_

## WORK HISTORY

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Supervisor: \_\_\_\_\_  
*Name Title Phone*

May we contact your previous supervisor for a reference?  YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Supervisor: \_\_\_\_\_  
*Name Title Phone*

May we contact your previous supervisor for a reference?  YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Supervisor: \_\_\_\_\_  
*Name Title Phone*

May we contact your previous supervisor for a reference?  YES  NO

**EDUCATION AND TRAINING**

High School: \_\_\_\_\_ Address: \_\_\_\_\_  
 Did you graduate? YES NO  
    Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_  
 Did you graduate? YES NO  
    Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_  
 Did you graduate? YES NO  
    Degree: \_\_\_\_\_

**SPECIAL SKILLS**

Typing \_\_\_\_\_  Computers  
 (wpm)

Word Processing \_\_\_\_\_  Other Skills \_\_\_\_\_  
 Programs

**AVAILABILITY**

HOURS AVAILABLE FOR WORK			COMMENTS
Mon	From: _____	To: _____	_____
Tue	From: _____	To: _____	_____
Wed	From: _____	To: _____	_____
Thurs	From: _____	To: _____	_____
Fri	From: _____	To: _____	_____
Sat	From: _____	To: _____	_____
Sun	From: _____	To: _____	_____

**ACADEMIC AND PROFESSIONAL ACTIVITIES AND ACHIEVEMENTS**

Academic and Professional Activities and Achievements, Awards, Publications, Professional Societies.  
 Exclude organizations which indicate race, color, creed, sex, age, handicap, or national origin or its members.

**DISCLAIMER AND SIGNATURE**

**IMPORTANT: Read Carefully**

Information contained in this application is correct to the best of my knowledge and I understand that falsification and/or omission of this information may result in dismissal in accordance with company policy. The company in considering my application for employment may verify the information set forth on this application and obtain additional information relating to my background. I authorize all persons, schools, companies, corporations, credit bureaus and law enforcement agencies to supply any information concerning to my background, and release all parties from liability for any damages that may result from furnishing same to you. In accepting employment, I acknowledge that the policies, benefits and other programs listed in the benefits booklet and policy manuals do not infer or imply a contract of employment between the company and myself. I realize the aforementioned benefits, policies, and programs are provided at company discretion and may be changed or eliminated at any time. In consideration of employment, I agree to conform to the rules and regulations of the company. I also realize that my first 90 days of employment is considered to be a probationary period, and thereafter at will, during which time my employment and compensation can be terminated, with or without notice, at any time, at the option of either the company or myself.

**I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Please Do Not Write Below This Line**

Post employment information

In case of emergency, notify: \_\_\_\_\_  
 Name Relationship Home Phone Work Phone

Address \_\_\_\_\_

*You can bring this in to your local Sun Diego or email it to us at [help@sundiego.com](mailto:help@sundiego.com)*