

PETERSON PACIFIC CORP.

APPLICATION FOR EMPLOYMENT

(This application is current for only 60 days. At the conclusion of this time if I have not heard from the Employer and still wish to be considered for employment, it will be necessary to fill out a new application.)

Peterson Pacific Corp. is an equal opportunity employment company. We are dedicated to a policy of non-discrimination in employment on any basis, including race, creed, color, age, sex, religion or national origin, or physical handicap.

PLEASE PRINT

All employees of Peterson Pacific Corp. are employees at will and, as such, are free to resign at any time without reason or notice. The company, likewise, retains the right to terminate an employee's employment at any time, with or without reason or notice.

NAME: DATE:

LAST FIRST MIDDLE

PRESENT ADDRESS:

STREET CITY STATE ZIP

PHONE NUMBER: SOCIAL SECURITY #:

(1) Type of employment desired: Full Time Part Time (2) Are you willing to work swing shift? Yes No

How Did You Learn About Us? Newspaper _____ Radio _____ Internet _____
Friend _____ Other _____

EMPLOYMENT DESIRED

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

Are you employed now? Yes No If so, may we inquire of your present employer? Yes No

Ever applied to this company before? Yes No Date: _____ Will you work overtime if asked? Yes No

EDUCATION	Name and Location of School	Number of Years Attended	Graduated (Yes - No)	Subject Studied
High School				
College				
Trade School Business School Correspondence				

Are you eligible for employment in the United States? Yes No

List States and Counties of Residence for the past seven years:

Yes No Have you used names or social security numbers other than those on this page? If so, please list:

Yes No Have you been convicted of a felony and/or ever served time? If so, please describe below.
(In accordance with company policy, this information will be reviewed for job relatedness and time since last conviction.)

Driver's license number (if job related): _____

If you are under 18, can you furnish a work permit: Yes No

EMPLOYMENT REFERENCES

Your application will not be considered unless every question in this section is answered, even if you have submitted a resume. Since we do not hire unless we are able to contact previous employers, the *correct telephone numbers of past employers are critical.*

Yes No Are you on lay off and subject to recall?

MOST RECENT/CURRENT EMPLOYER: Yes No Are you currently working for this employer?

Yes No May we contact this employer for reference?

COMPANY NAME _____ CITY _____ STATE _____ () _____
PHONE NUMBER

From: _____ **To:** _____
DATES EMPLOYED JOB TITLE SUPERVISOR NAME/TITLE

DUTIES _____

SALARY (Hour, Week, or Month) _____ REASON FOR LEAVING _____

SECOND MOST RECENT EMPLOYER:

COMPANY NAME _____ CITY _____ STATE _____ () _____
PHONE NUMBER

From: _____ **To:** _____
DATES EMPLOYED JOB TITLE SUPERVISOR NAME/TITLE

DUTIES _____

SALARY (Hour, Week, or Month) _____ REASON FOR LEAVING _____

THIRD MOST RECENT EMPLOYER:

COMPANY NAME _____ CITY _____ STATE _____ () _____
PHONE NUMBER

From: _____ **To:** _____
DATES EMPLOYED JOB TITLE SUPERVISOR NAME/TITLE

DUTIES _____

SALARY (Hour, Week, or Month) _____ REASON FOR LEAVING _____

OTHER REFERENCES Include only individuals familiar with your work ability. Do not include relatives.

NAME	ADDRESS/PHONE	YRS KNOWN/BUSINESS RELATIONSHIP
1.		____ yrs,
2.		____ yrs,
3.		____ yrs,

SKILLS & QUALIFICATIONS: _____

COMMENTS: _____

CERTIFICATION and RELEASE: I certify that I have read and understand the information and questions on this form and that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief.

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Signature

Date

PLEASE ALSO READ AND SIGN THE ATTACHED PAGE, REQUIRED BY THE NEW FEDERAL FAIR CREDIT REPORTING ACT.

Peterson Pacific Corp.
DISCLOSURE STATEMENT

CERTIFICATION AND RELEASE:

I certify that I have read and understand the information and questions on the attached form and that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions, or misrepresentations of facts called for on my application may result in rejection of my application or discharge at any time during my employment. I authorize the company and/or its agents, including consumer reporting bureaus, to verify any of this information including, but not limited to, criminal history and motor vehicle driving records. I authorize all persons, schools, companies and law enforcement authorities to release any information concerning my background and hereby release any said personal schools, companies and law enforcement authorities from any liability for any damage whatsoever for issuing this information. I also understand that the use of, or working under the influence of illegal drugs or alcohol is prohibited during employment. If the company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to employment and to drug and alcohol testing during employment.

Agreed to by:

Signature of applicant

Date