

# APPLICATION FOR EMPLOYMENT



Santa Barbara Home Improvement Center  
 415 E. Gutierrez St.  
 Santa Barbara, CA 93101

Telephone: (805) 963-7825  
 Fax: (805) 963-9753

We are an Equal Opportunity Employer. It is our policy to abide by all Federal, State and local laws prohibiting discrimination in employment. No question in this application is intended to elicit information in violation of any such laws nor will any information obtained in response to any question be used in violation of any such law.

**(PLEASE PRINT) Incomplete applications will NOT be considered**

**Position(s) Applied For:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Referral Source:** News Press  Friend  Walk-In   
 Craig's List  Other \_\_\_\_\_

**Name:** \_\_\_\_\_  
Last First Middle

**Address:** \_\_\_\_\_  
Street City State Zip

**Telephone(s):** \_\_\_\_\_ **Social Security Number (After Job Offer):** \_\_\_\_\_

If employed and you are under 18, can you furnish a work permit? Yes  No  N/A

Have you filed an application here before? Yes  No  If yes, give date: \_\_\_\_\_

Have you ever been employed here before? Yes  No  If yes, give date: \_\_\_\_\_

Are you employed now? Yes  No  May we contact your present employer? Yes  No  N/A

If NO, your reason for refusal: \_\_\_\_\_

If hired, can you furnish proof you are legally entitled to work in the United States? Yes  No

On what date would you be available to work?: \_\_\_\_\_

What type of employment are you seeking? F/T(40 hours)  P/T(16-29 hours)  Temp.(Variable hours)

If hired, what length of time do you expect to work for our company?

Less than 6 months  6 months to a year  One to two years  More than two years

### PERSONAL REFERENCES

Give name, address and telephone number of three references not related to you and not previous employers.

1. \_\_\_\_\_  
(Name) (Address) (Phone #)
2. \_\_\_\_\_  
(Name) (Address) (Phone #)
3. \_\_\_\_\_  
(Name) (Address) (Phone #)

Education	Name & Address of school	Course of Study	Years Completed	Did you receive a Diploma or Degree?
High School				YES <input type="checkbox"/> NO <input type="checkbox"/> In Progress <input type="checkbox"/>
College				YES <input type="checkbox"/> NO <input type="checkbox"/> In Progress <input type="checkbox"/>

# Employment Experience -

Start with your present, or last job. 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. List jobs, starting with present, or last job. If the last five do not account for at least ten years of employment, list additional jobs if applicable. Please explain all employment gaps.

1.	Employer	Telephone	Dates Employed mm/yy		Work Performed
			From	To	
	City, State, & Zip Code		/	/	
	Job Title	Current average weekly hours?	Have you been promoted with this company?		
	Supervisor's Name & Title		Owner's Name		
	Reason for leaving or planning to leave job?				
2.	Employer	Telephone	Dates Employed mm/yy		Work Performed
			From	To	
	City, State, & Zip Code		/	/	
	Job Title	Current average weekly hours?	Have you been promoted with this company?		
	Supervisor's Name & Title		Owner's Name		
	Reason for leaving or planning to leave job?				
3.	Employer	Telephone	Dates Employed mm/yy		Work Performed
			From	To	
	City, State, & Zip Code		/	/	
	Job Title	Current average weekly hours?	Have you been promoted with this company?		
	Supervisor's Name & Title		Owner's Name		
	Reason for leaving or planning to leave job?				
4.	Employer	Telephone	Dates Employed mm/yy		Work Performed
			From	To	
	City, State, & Zip Code		/	/	
	Job Title	Current average weekly hours?	Have you been promoted with this company?		
	Supervisor's Name & Title		Owner's Name		
	Reason for leaving or planning to leave job?				
5.	Employer	Telephone	Dates Employed mm/yy		Work Performed
			From	To	
	City, State, & Zip Code		/	/	
	Job Title	Current average weekly hours?	Have you been promoted with this company?		
	Supervisor's Name & Title		Owner's Name		
	Reason for leaving or planning to leave job?				

Please explain your future works goals and how they fit with working for our company :

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**Special Skills & Qualifications**

Summarize any special skills and qualifications acquired from past employment or other experience, such as specific office skills, language fluency, equipment operation, first aid, etc.

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**Applicant's Statement**

I have provided complete and truthful information in response to the questions in this application, and understand that any misrepresentations or material omissions concerning such information will be grounds for denying my application, withdrawing any offer of employment, or immediate discharge.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically confirmed in writing by the President of the company.

I understand that this application is not and is not intended to be a contract of employment. I further understand and authorize that in connection with the application process, the SBHIC may request information from my past employers, educational institutions, personal references and any public or private agencies that have issued me either a professional license or vocation certification or license. I also understand that if I am offered a position with SBHIC, that this offer may be conditioned on SBHIC reviewing the results of an investigation of my credit history (cash handling/accounting/management positions only) and/or any criminal records.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

As a condition of employment, all employees must take and pass a pre-employment drug test. Since drug test results are normally not verified until after employees began working for us, all applicants should keep in mind that as a condition of their continued employment with us, the results of the drug screening must come back negative.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the company.

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Signature of Applicant

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Date