

Application for Employment

(Pre-employment questionnaire) (An equal opportunity employer)

Date	_			
Name	First		Middle	
Present AddressStreet	City		State	Zip
Phone () Cell Phone	()Email			
Permanent Address If different from above Street	City		State	Zip
Best time to reach me				
GENERAL				
Position Date	e you can start			
Times available: M	T	W		
ThF			s	
Specify any hours or days you cannot or will no	t work:			
Upon request can you provide proof that you ar	e authorized to work in the United States?	Yes	No	
Are you over 18 years of age? (If under 18, hire is subject to verification that yo	ou are of minimum legal age.)	Yes	☐ No	
Have you ever worked for us?		Yes	No	
If so, when and where				
Have you ever applied for work with us before?		Yes	No	
If so, when and where				
How were you referred to us?				
List any friends, acquaintances, and relatives w	orking at La Petite Baleen and their relation	ship to you		

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EDUCATION

High School or GED				Graduated: [Yes No		
Type of degree/diploma/c	ertificate [
Post-Secondary School:		University			tes	_	
Type of degree/diploma/c	ertificate						
Major/Subjects studied							
Other							
EMPLOYMENT H	ISTOR	Y					
Start with your most recer	nt position,	use additional she	ets if necessa	ary. Do not omit any	employers.		
Employer				Name			
Address				Phone ()		
Date Started		Date Ended		(For all dates, inc	clude month and ye	ear)	
Starting Position		· · · · · · · · · · · · · · · · · · ·	_ Salary		hr./mo.		
Ending Position		· · · · · · · · · · · · · · · · · · ·	_ Salary		hr./mo.		
If currently employed, mag	y we conta	ict your present em	ployer?	Yes No			
Job title				Supervisor			
Brief description of your re	esponsibili	ties					
Reason for leaving							
Employer							
Date Started		Date Ended		(For all dates, inc	clude month and ye	ear)	
Starting Position			_ Salary		hr./mo.		
Ending Position					hr./mo.		
If currently employed, mag	•		. , _				
Job title				Supervisor			
Brief description of your re	esponsibili	ties					
Reason for leaving							

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Which of these jobs did you like best?	
What did you like most about this job?	
OTHER RELEVANT BACKGROUND	
Specify any special training relevant to the job applied for:	
Specify any special skills relevant to the job applied for:	
ESSENTIAL REQUIREMENTS OF THE POSITION	N
The essential requirements of the job for which you are applying are spe	ecified on the attached job description.
Can you perform the listed essential requirements with or without reason	
(Note: We comply with the ADA and state law and consider reasonable applicants/employees to perform essential functions.)	accommodation measures that may be necessary for eligible
If driving is an essential function of the job you are applying for,,please f	fully describe your driving records for the past seven years:
(Note: Background checks including DMV records may be required at a	ny point during the application and hiring process.)
WORK / VOLUNTEER REFERENCES	
Give the names of three persons not related to you whom you have kno qualifications.	wn at least one year and who can give information about your work
1. Name	Address
Phone ()	_ Email
Occupation	Years known
How known	
1. Name	Address
Phone ()	Email
Occupation	Years known
How known	
1. Name	Address
Phone ()	Email
Occupation	Years known
How known	

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WORK EXPERIENCE WITH CHILDREN (Only applicants for school positions)

(Only applicants for school positions)	
Write a summary of your work experience with children. Include any experiences that jobs., etc.	you had had with children: babysitting, volunteering,
OTHER	
Besides the crime of possession of less than an ounce of Marijuana for personal use m	nore than two years ago, have you ever plead guilty to, no
contest to, or been convicted of any crime? (Misdemeanor automobile moving violation	
	Yes No
Describe nature of the crime(s), when and where convicted and disposition of the case	9
(A conviction will not necessarily disqualify an applicant for the job applied for. The nat surrounding circumstances and the relevance of the offense to the position(s) applied	for will be considered. You may exclude any conviction
where the record was judicially ordered sealed, expunged or statutorily eradicated; any Penal Code; and any information concerning a referral to, or participation in, any pretri	
Have you ever committed a crime?	Yes No
Describe	
Are you currently under arrest pending trial?	Yes No
If yes, describe how it will affect your availability for work, if at all:	163 110
in yes, describe now it will affect your availability for work, if at all.	
Have you ever stolen property or money from a former employer?	Yes No
Describe	
Have you ever damaged a former employer's property?	Yes No
Describe	
Do you carry a weapon on your person?	Yes No
If yes, do you have a permit to carry the weapon?	Yes No

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PLEASE TELL US ABOUT YOURSELF						

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PLEASE CAREFULLY READ THE FOLLOWING STATEMENT BEFORE SIGNING

I hereby certify that all information contained in this application is true and correct to the best of my knowledge. I further certify that I have not knowingly withheld any information that may adversely affect my chances for employment. I understand that any error or omission of information may result in denial of employment or termination at any time. I authorize all my current and former employers and their employees, past or present, to give The Little Whale Swim School ("the Company") any and all information concerning my employment history and any pertinent information they may have, personal or otherwise. I also authorize that all my former schools may give the Company any or all information concerning my education. I also authorize all the references that I have provided to give any information to the Company that they consider relevant. I waive all privacy interests in such information.

I understand that the Company also may require background screening conducted by a background check provider at any time during the application and hiring process. The Company will provide a separate authorization in such event.

I further release all the sources referenced above (and all their employees, officers, directors and agents) and the Company (and its employees, officers, directors and agents) of all claims and liability for any damages resulting from their furnishing any information, whether I agree or disagree with the content of the disclosed information. Thus, I understand that if any one of the above sources discloses information which I believe to be erroneous, I cannot bring any legal action against that source or the Company regarding the disclosure of the information. In this regard, I waive any and all benefits associated with California Civil Code Section 1542, which provides:

"General Release/Claims Extinguished. To the fullest extent permitted by law, a general release does not extend to claims which the creditor does not know or suspect to exist in his/her favor at the time of executing the release, which if known by him/her must have materially affected his settlement with the debtor."

If employed, I understand that my employment can be terminated with or without cause, at any time, and for any reason, or no reason, at the option of either the Company or myself. I understand that no one, other than an officer of the Company has any authority to enter into an agreement for employment for a specified period of time, or to make any agreement contrary to the foregoing. Any agreement entered into by an officer can only be made in writing signed by him/her and the employee.

I understand that the issuance of this Application does not indicate that there are any positions open.

Name

Date

reas	comply with the requirements of the Americans with Disabilities Act and state law. If you feel that you require a onable accommodation at any step of the interview/application process please notify us within a reasonable time may request that you support your request with medical documentation.
affilia regis statu all fa	bur policy and intent to provide equal opportunity to all persons without regard to race, color, religion, political ation, sex/gender (including gender identity, pregnancy, childbirth and related medical conditions) marital status, stered domestic partner status, sexual orientation, age (over 40), ancestry, national origin, military and veteran is, disability, medical condition, or genetic characteristics as defined in state and federal laws. This policy covers icets of employment including, but not limited to: recruitment, selection, placement, promotions, transfers, obtions, terminations, training, compensation and all aspects of employment.

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Employer		Name	
Address		Phone ()
Date Started	Date Ended	(For all dates, in	clude month and year)
Starting Position	Salary		hr./mo.
Ending Position	Salary		hr./mo.
If currently employed, may	we contact your present employer?	☐ Yes ☐ No	
Job title		_ Supervisor	
Brief description of your res	sponsibilities		
Reason for leaving			
)
Date Started	Date Ended	(For all dates, in	clude month and year)
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Employer		Name	
)
	Date Ended		
	Salary		
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Brief description of your res		_ Supervisor	
2.1.5. description of your res	Spot distillation		
December legister			
Reason for leaving			