



Glen Ivy Village Inc / Glen Ivy Amusement Inc

EMPLOYMENT APPLICATION

We are committed to a policy of equal employment opportunity to all persons without regard to race, color, religion, sex, pregnancy, marital or domestic partner status, actual or perceived sexual orientation, gender identity or express, military and veteran status, civil air patrol status, age, ancestry, national origin, disability or medical condition. For purposes of this policy, discrimination on the basis of "national origin" also includes discrimination against an individual because of their primary language or that person holds or presents the California driver's license issued to those who cannot document their lawful presence in the United States. Employment decisions will comply with all applicable laws prohibiting discrimination in employment, including Title VII of the Civil Rights Act of 1964, the Age Discrimination in Employment Act of 1967, the Americans With Disabilities Act of 1990, the Immigration and Nationality Act, and any applicable state laws or local ordinances. This policy covers all aspects of employment, including, but not limited to, recruitment, selection, training, promotion, transfer, compensation, demotion and termination.

Unsigned or incomplete applications will not be considered or retained.

PLEASE PRINT

Today's Date _____

Name _____
Last First Middle

Present Address _____

City/State/Zip _____

Daytime Number (_____) _____ - _____ Evening Number (_____) _____ - _____

E-Mail _____

EMPLOYMENT DESIRED

Position for which you are applying: _____

Wage Expectation: _____

(PLEASE APPLY FOR SPECIFIC OPEN POSITIONS)

Are you applying for: Full-time work Part-time work

Can you perform the essential requirements of the position you are apply for, with or without reasonable accommodation? Yes No

(Note, the Company complies with the American with Disabilities Act and state law and considers reasonable accommodation measures that may be necessary for eligible employees to perform essential functions of the position. The Company also does not retaliate or otherwise discriminate against applicants or employees who request a reasonable accommodation for reasons related to disability or religion.)

Please list your availability:

	Mon	Tue	Wed	Thurs	Fri	Sat	Sun
IN							
OUT							

REFERRAL SOURCE

____ Advertisement
 ____ Walk – In
 ____ Employee Referral (Name of Employee – please list one only: _____)
 ____ Other (_____)

PERSONAL INFORMATION

For Security / Server / Bartender Applicants only – the requirements of a security guard are that you hold a valid California Security license (Guard Card) or Proprietary Private Security Officer license. Servers must be at least 18 years and bartenders must be at least 21 years old. Do you meet these requirements? Yes No Not Applicable

If hired, do you have reliable means of transportation to and from work? Yes No

If hired, can you present evidence of either your U.S. Citizenship or your legal right to work in this country? Yes No

BACKGROUND INFORMATION

Have you ever been:

- Discharged for poor job performance? Yes No
- Discharged for insubordination? Yes No
- Discharged for violating a safety rule? Yes No
- Discharged for absenteeism, tardiness, failure to notify your company when absent or any other attendance-related misconduct? Yes No
- Discharged for fighting, assault, or similar misconduct? Yes No
- Discharged for being under the influence of alcohol or drugs at work, or for possessing alcohol or drugs at work? Yes No

MILITARY SERVICE

Have you served or are you presently serving in the United States Armed Forces? Yes No

If *yes*, which branch? _____ Length of Service: _____

EDUCATION

	Elementary School	High School	Undergraduate College/University	Graduate or Professional
School Name				
Location				
Years Completed				
Course of Study				

Describe any specialized training, apprenticeship, skills, honors and/or extra-curricular activities (relevant to the job you are applying for):

Do you have any other experience, training, qualifications or skills which you feel make you especially suited for work at our company? If so, please explain.

EMPLOYMENT HISTORY

List below all present and past employment starting with your most recent employer. If necessary, use additional blank pages for prior employment. We may contact employers listed below unless you indicate otherwise.

Employer Name: _____	Address: _____
Your Job Title: _____	Supervisor Name: _____ Supervisor Phone: _____
Work Performed: <i>Use both lines to describe if necessary</i>	
Reason for Leaving: _____ OK to Contact Supervisor? Yes: <input type="checkbox"/> No: <input type="checkbox"/>	

Employer Name: _____	Address: _____
Your Job Title: _____	Supervisor Name: _____ Supervisor Phone: _____
Work Performed: <i>Use both lines to describe if necessary</i>	
Reason for Leaving: _____ OK to Contact Supervisor? Yes: <input type="checkbox"/> No: <input type="checkbox"/>	

Employer Name: _____	Address: _____
Your Job Title: _____	Supervisor Name: _____ Supervisor Phone: _____
Work Performed: <i>Use both lines to describe if necessary</i>	
Reason for Leaving: _____ OK to Contact Supervisor? Yes: <input type="checkbox"/> No: <input type="checkbox"/>	

REFERENCES

List below three people you have known at least one year. Do not list relatives or former employers.

Last Name	First	Middle	Occupation
Street Address			Telephone Number
City, State, Zip			Number of years known

Last Name	First	Middle	Occupation
Street Address			Telephone Number
City, State, Zip			Number of years known

Last Name	First	Middle	Occupation
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City, State, Zip			Number of years known

PLEASE READ AND SIGN BELOW

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize the company to whom I am submitting this application (the "Company") to thoroughly investigate my references, work record, education, criminal conviction record, and all other matters related to my suitability for employment. I also authorize my former employers to disclose to the Company any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers, and all persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure of my references, work record, education, criminal conviction record or any other aspect of my background or suitability for employment.

I hereby acknowledge that any employment relationship I would enter into with the Company is of an "at will" nature. This means that during the course of my employment, I am free to end my employment with the Company at any time, with or without cause and with or without advance notice. It also means that the Company may terminate my employment at any time, with or without cause and with or without advance notice, or may modify any aspect, term, or condition of my employment (e.g., job duties, title, compensation, hours, benefits, policies, and practices) -- except for the "at will" nature of the employment relationship -- at any time, with or without cause and with or without advance notice. I understand that the "at will" nature of my employment relationship with the Company cannot be modified except by a written agreement signed by both the President of the Company and the Vice President / Secretary of the Company.

If hired, I understand that the Company requires all new employees to produce proof of eligibility to work in the United States as set forth in the USCIS Form I-9. Employees will not be allowed to work until they bring the required eligibility document or documents, or a receipt for a document. Employees who fail to produce the required document or documents, or a receipt for a document, within three business days of the date employment begins may be terminated from employment.

My signature below certifies that I have read, understood, and agree to the above, and the information in this application is true and correct.

Signature of Applicant

Date

Name (Print)

EQUAL EMPLOYMENT OPPORTUNITY APPLICANT IDENTIFICATION RECORD

IMPORTANT – TO THE APPLICANT: The information requested on this form is required by the regulations for the federal EEOC and state Department of Fair Employment and Housing. Employers are required to keep these records on file for a period of two years. For your protections, employers are ordered to store the records away from your application. The information is for data purposes only, and voluntary on your part.

Name: _____ **Date:** _____

Position applied for: _____

SEX:

Male: _____ Female: _____

RACE OR ETHNICITY (PLEASE CHECK ONE):

Hispanic or Latino*:	_____	Asian:	_____
White (Not Hispanic or Latino):	_____	American Indian or Alaska Native:	_____
Black or African America:	_____	Two or More Races:	_____
Native Hawaiian or Other Pacific Islander	_____	Prefer Not To Disclose My Race Or Ethnicity	_____

***Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

It is our policy to afford equal employment opportunity to all individuals, with all employment decisions based upon merit and business needs, and not on race/ethnicity, color, citizenship status, national origin, ancestry, sex, age, religion, physical or mental disability, medical condition, marital status or veteran status.

This Applicant Identification Record will be kept in a confidential file separate from the Employment Application