

Employment Application  
San Diego Country Estates

*We do not check application status.  
If your application is selected we will contact you.*

An Equal Opportunity Employer

**Please Print**

\_\_\_\_\_  
Date Last Name First Name M.I.

Present address

\_\_\_\_\_  
No. & Street City State Zip

Permanent Address (if different from present address)

\_\_\_\_\_  
No. & Street City State Zip

(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Home Phone Cell Phone

**Employment Desired**

Position applying for: \_\_\_\_\_ Salary Expected: \_\_\_\_\_

If employed, when can you start work? \_\_\_\_\_

Applying for ( ) Full-Time ( ) Part-Time ( ) Temporary

Are you available for work on weekends: ( ) Yes ( ) No

**Personal Information**

Have you ever applied to or worked for San Diego Country Estates before? ( ) Yes ( ) No

If yes, when? \_\_\_\_\_

Do you have any friends or relatives working for San Diego Country Estates? ( ) Yes ( ) No

If yes, state name(s) and relationship:

\_\_\_\_\_  
Name Relationship

\_\_\_\_\_  
Name Relationship

Why are you applying for work at San Diego Country Estates?

\_\_\_\_\_

If hired, would you have a reliable means of transportation to and from work? ( ) Yes ( ) No

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.) ( ) Yes ( ) No

If hired, can you present evidence of your U.S. citizenship or proof of you legal right to live and work in this country? ( ) Yes ( ) No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? ( ) Yes ( ) No

If no, describe the functions that cannot be performed.

\_\_\_\_\_

(Note: we comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? (Convictions for marijuana-related offenses that are more than two years old need not be listed.)

( ) Yes ( ) No

If yes, state nature of the crime(s), when and where convicted, and disposition of the case.

\_\_\_\_\_

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for may, however, be considered.)

**Education, Training and Experience**

School	Name And Address	No. of years Completed	Did you Graduate?	Degree Or Diploma
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<b>High School</b>	_____	_____	( ) Yes ( ) No	_____
	Name			
	_____			
	Address			
	_____			
	City	State	Zip	

<b>College/ University</b>	_____	_____	( ) Yes ( ) No	_____
	Name			
	_____			
	Address			
	_____			
	City	State	Zip	

<b>Vocational/ Business</b>	_____	_____	( ) Yes ( ) No	_____
	Name			
	_____			
	Address			
	_____			
	City	State	Zip	

### Employment History

List below all present and past employment starting with your most recent employer. Account for all periods of unemployment. **You must complete this section even if attaching a resume.**

\_\_\_\_\_  
Name of Employer (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Type of Business \_\_\_\_\_  
Your Supervisor's Name

\_\_\_\_\_  
Address & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Dates of Employment \_\_\_\_\_ Annual Salary (base pay) \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Starting \_\_\_\_\_ Ending \_\_\_\_\_

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

May we contact this employer for a reference? ( ) Yes ( ) No

\_\_\_\_\_  
Name of Employer (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Type of Business \_\_\_\_\_  
Your Supervisor's Name

\_\_\_\_\_  
Address & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Dates of Employment \_\_\_\_\_ Annual Salary (base pay) \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Starting \_\_\_\_\_ Ending \_\_\_\_\_

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

May we contact this employer for a reference? ( ) Yes ( ) No

\_\_\_\_\_  
Name of Employer (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Type of Business \_\_\_\_\_  
Your Supervisor's Name

\_\_\_\_\_  
Address & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Dates of Employment \_\_\_\_\_ Annual Salary (base pay) \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Starting \_\_\_\_\_ Ending \_\_\_\_\_

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

May we contact this employer for a reference? ( ) Yes ( ) No

Note: Attach additional page(s) if necessary.



\_\_\_\_\_  
Initials

I understand that, as a condition of employment with the San Diego Country Estates, I may be required to provide my consent to submit to a pre-employment blood test, urinalysis, medical examination, or other drug and/or alcohol screening. I understand that my refusal to consent to a required pre-employment drug and/or alcohol test will make me ineligible for employment with the Company. I also understand that a positive result on this required drug and/or alcohol test shall constitute grounds for denying employment to me or withdrawing an offer of employment. I understand that the Company shall determine the manner in which such drug and/or alcohol testing is conducted, with the goal being to ensure that the test results are accurate.

\_\_\_\_\_  
Initial

Should a search of public records (including records documenting any arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Company, I am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

( ) I waive receipt of a copy of any public record described in the paragraph above.

I have read and understand this Agreement and signed it of my own free will after having been given an opportunity to ask questions which, if asked, were answered satisfactorily and in a manner which I understood.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature