

**Employment Application Form**

When completed, return with resume to:

Via postal mail:

Foothill Associates  
Attn: Human Resources Director  
590 Menlo Drive, Suite 1  
Rocklin, CA 95765

Via e-mail:

hr@foothill.com

Via fax:

916-435-1205  
Attn: Human Resources Director

Please Print or Type

**Name and Date:**\_\_\_\_\_  
Last Name\_\_\_\_\_  
First Name\_\_\_\_\_  
M.I.\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date**Current Address:**\_\_\_\_\_  
Number and Street\_\_\_\_\_  
City\_\_\_\_\_  
State\_\_\_\_\_  
Zip(\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
Business or Cell Phone(\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
Home Phone\_\_\_\_\_  
E-mail Address**Permanent Address (if different from Current Address):**\_\_\_\_\_  
Number and Street\_\_\_\_\_  
City\_\_\_\_\_  
State\_\_\_\_\_  
Zip(\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
Permanent Phone (if different from above)**Employment Desired:**

Position Applying for: \_\_\_\_\_ Job Number: \_\_\_\_\_

Office Location:  Chico  Reno  Sacramento (Rocklin)  San Diego

Are you applying for:

Regular full-time work? \_\_\_\_\_  Yes  NoRegular part-time work? \_\_\_\_\_  Yes  NoTemporary work (seasonal, summer, or holiday work)? \_\_\_\_\_  Yes  No

Hours per Week: \_\_\_\_\_

Work availability:

Are you available to work on weekends? \_\_\_\_\_  Yes  NoWould you be available to work overtime, if necessary? \_\_\_\_\_  Yes  No

If hired, on what date could you start work? \_\_\_\_\_

Salary desired: \_\_\_\_\_

Please Print or Type

**Personal Information:**

Have you ever applied to or worked for Foothill Associates before?  Yes  No

If yes, when and under what circumstances? \_\_\_\_\_

Do you have any friends or relatives working for Foothill Associates?  Yes  No

If yes, state name(s) and relationship:

\_\_\_\_\_  
Foothill Employee Name Relationship

\_\_\_\_\_  
Foothill Employee Name Relationship

Why are you applying for work at Foothill Associates?

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

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

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

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? \_\_\_\_\_  Yes  No  
(Convictions for marijuana-related offenses that are more than two years old need not be listed.)

If yes, state the nature of the crime(s), when and where convicted, and the 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, the date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for may, however, be considered.)

Are you currently employed? \_\_\_\_\_  Yes  No

If so, may we contact your employer? \_\_\_\_\_  Yes  No

Please Print or Type

**Education, Training, and Experience:**

Education Level:	School Name and Address:	No. of Years Completed:	
High School	_____ High School Name _____ Address _____ City                      State      Zip	_____	Did You Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No  Degree(s) or Diploma: _____
College/ University	_____ College/University Name _____ Address _____ City                      State      Zip	_____	Did You Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No  Degree: _____  Major: _____
Post-Graduate	_____ College/University Name _____ Address _____ City                      State      Zip	_____	Did You Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No  Degree: _____ Area of Study: _____
Vocational/ Business	_____ Vocational/Business School Name _____ Address _____ City                      State      Zip	_____	Did You Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No  Degree(s) or Diploma: _____

Do you have any other experience, training, qualifications, or skills that are pertinent to the position for which you are applying?  
are applying? \_\_\_\_\_  Yes  No  
If yes, please explain:

Answer the following questions if you are applying for a professional position:

Are you licensed/certified for the job you're applying for? \_\_\_\_\_  Yes  No  Not Applicable  
Name of license/certification: \_\_\_\_\_  
Issuing State: \_\_\_\_\_ License/certification number: \_\_\_\_\_

Has your license/certification ever been revoked or suspended? \_\_\_\_\_  Yes  No  
If yes, state reason(s), date of revocation, and date of reinstatement:





Please Print or Type

Please read carefully, initial each paragraph, and sign and date below:

         Initial 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.

         Initial I hereby authorize Foothill Associates to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment and, further, authorize the references I have listed 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 other 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.

         Initial I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

         Initial Should a search of public records (including records documenting an 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.

\_\_\_\_\_ Date

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

\_\_\_\_\_ Applicant's Printed Name