



4675 MacArthur Court #1400 Newport Beach, CA 92660  
(949) 752-1282 Fax (949) 752-0301



# EMPLOYMENT APPLICATION

ONLY FULLY COMPLETED APPLICATIONS WILL BE ACCEPTED

## PERSONAL INFORMATION (Please Print)

Date: \_\_\_\_\_

\_\_\_\_\_  
Name (Last, First & Middle initial)

\_\_\_\_\_  
Home Telephone

\_\_\_\_\_  
Cell phone

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Pay Desired

Full Time

Part Time

\_\_\_\_\_  
What hours / days are you available?

\_\_\_\_\_  
Are your work hours flexible?

\_\_\_\_\_  
Date available to begin work?

\_\_\_\_\_  
Have you applied for a position with us before?

\_\_\_\_\_  
Have you worked for us before?  
If Yes, which site? Dates?

\_\_\_\_\_  
What position are you applying for?

## EDUCATION

\_\_\_\_\_  
High School (name and location)

\_\_\_\_\_  
Course of Study

\_\_\_\_\_  
No. of years

\_\_\_\_\_  
Did you graduate?

\_\_\_\_\_  
College (name and location)

\_\_\_\_\_  
Course of Study

\_\_\_\_\_  
No. of years

\_\_\_\_\_  
Did you graduate?

\_\_\_\_\_  
Business or Trade school (name and location)

\_\_\_\_\_  
Course of Study

\_\_\_\_\_  
No. of years

\_\_\_\_\_  
Did you graduate?

**Membership in professional or Civic Organization or any special skills that may be significant to the job.** (exclude those which may disclose your race, color, religion or national origin)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No If yes, give details: \_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT** - Please list your job history for the past 10 years (or last 4 employers). Start with your present status and note any periods in which you were not employed. This portion **MUST** be completed, even if attaching a resume.

Do you authorize us to contact your present employer to verify the following information?  Yes  No

1.	_____	_____
	Company Name	Telephone (must fill in)
	_____	_____
	Address	From: _____ To: _____
	City / State	Employed (Month & Year)
	_____	_____
	Name of Supervisor	Start: _____ End: _____
	_____	Pay (monthly/hourly)
	Job Title & Describe Duties	_____
		Reason For Leaving
2.	_____	_____
	Company Name	Telephone (must fill in)
	_____	_____
	Address	From: _____ To: _____
	City / State	Employed (Month & Year)
	_____	_____
	Name of Supervisor	Start: _____ End: _____
	_____	Pay (monthly/hourly)
	Job Title & Describe Duties	_____
		Reason For Leaving
3.	_____	_____
	Company Name	Telephone (must fill in)
	_____	_____
	Address	From: _____ To: _____
	City / State	Employed (Month & Year)
	_____	_____
	Name of Supervisor	Start: _____ End: _____
	_____	Pay (monthly/hourly)
	Job Title & Describe Duties	_____
		Reason For Leaving
4.	_____	_____
	Company Name	Telephone (must fill in)
	_____	_____
	Address	From: _____ To: _____
	City / State	Employed (Month & Year)
	_____	_____
	Name of Supervisor	Start: _____ End: _____
	_____	Pay (monthly/hourly)
	Job Title & Describe Duties	_____
		Reason For Leaving

**MILITARY:** Did you serve in the US Armed Forces?  Yes  No If yes, what branch & rank? \_\_\_\_\_  
Describe training received relevant to the position for which you are applying. \_\_\_\_\_  
\_\_\_\_\_



## AUTHORIZATION FOR CONSUMER REPORTS

I instruct and authorize **DAHNCORPORATION**, including its designated representatives, affiliated and/or related entities, and agents (collectively, the "Company") to obtain a consumer report(s) on me, including any investigative consumer reports and any consumer credit reports.\* I also agree that a copy of this form is valid like the signed original.

I acknowledge that: (a) I have received the Consumer Report Disclosure and any additional disclosures and notices required by law; (b) each document is clear, conspicuous, and separate from any other document(s); (c) I have read and understood them; and (d) the Company may rely on them to obtain one or more consumer reports and/or investigative consumer reports on me.

The consumer reporting agency ("CRA") ADP Screening and Selection Services, Inc. ("ADP SASS") will prepare the consumer report for the Company. ADP SASS is located at 2950 East Harmony Road, Suite 130, Fort Collins, CO, 80528, and can be reached by phone at 800-367-5933, or at [www.adpselect.com](http://www.adpselect.com).

I understand that, where allowed by applicable law, the Company may rely on this authorization to order additional consumer reports, including investigative consumer reports and any consumer credit reports\* during my employment, without asking me for my authorization again. Where allowed by law, I authorize the Company to procure any such subsequent reports. I understand the Company may order consumer report(s) under my legal name and any other names I may have used.

I also instruct and authorize the following persons, agencies, and entities to disclose to ADP SASS and its agents all information about or concerning me, as allowed by law, including but not limited to: my past or present employers; learning institutions, including colleges and universities; law enforcement and all other federal, state and local agencies; federal, state and local courts; the military; credit bureaus; testing facilities; motor vehicle records agencies; all other private and public sector repositories of information; and any other person, organization, or agency with any information about or concerning me. As allowed by law, such disclosures may contain the following information pertaining to me: credit history\*; public records; a Social Security number verification; driving records; military service; credentials/certifications; worker's compensation injuries; and verification of prior employment and education.

**\*I understand that I am instructing and authorizing the Company to obtain a consumer credit report only to the extent permitted by law. If I reside or anticipate being employed in New York City, I understand that I am not being asked to authorize a consumer credit report by signing this document.**

**By signing below, I understand that I am agreeing to the terms contained in this document.**

<b>If you live, work, or are applying to work for the Company in California, Minnesota or Oklahoma:</b> Check this box if you would like a free copy of your consumer report, credit report, or investigative consumer report: <input type="checkbox"/>
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Please print your full legal name:

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

\_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Today's Date (Month/Day/Year)