



WOODLAND WELDING WORKS

P.O. Box 1194 ♦ 1955 E. MAIN ST. ♦ WOODLAND, CA. 95776 ♦ PHONE: (530) 666-5531 ♦ FAX: (530) 666-5533

APPLICATION FOR EMPLOYMENT

NOTE TO ALL APPLICANTS:

WE CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB-RELATED MEDICAL CONDITION OR HANDICAP, OR ANY OTHER LEGALLY PROTECTED STATUS.

1. PLEASE FILL OUT THE APPLICATION IN DETAIL, INCLUDING PHONE NUMBERS OF PAST EMPLOYERS AND REFERENCES. SUBMITTING A RESUME AS EXTRA IS ACCEPTABLE, HOWEVER, THE APPLICATION MUST STILL BE COMPLETED.
2. IF APPLICABLE, SUBMIT COPIES OF YOUR WELDER CERTIFICATION PAPERS.
3. DMV PRINTOUT MAY BE REQUIRED.
4. THERE WILL BE ABSOLUTELY NO INTERVIEW UNTIL YOUR APPLICATION HAS BEEN REVIEWED. QUALIFIED APPLICANTS WILL BE NOTIFIED AT THAT TIME.
5. ALL APPLICATIONS MUST BE COMPLETED ON THE PREMESIS.

PROOF OF CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT. BE PREPARED TO SHOW VERIFICATION.

THANK YOU FOR YOUR TIME AND INTEREST IN **WOODLAND WELDING WORKS**

Applicant:	Date:
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APPLICATION FORM

POSITION(S) APPLIED FOR		DATE OF APPLICATION
HOW DID YOU LEARN ABOUT US?		
<input type="checkbox"/> EMPLOYMENT AGENCY	<input type="checkbox"/> FRIEND	<input type="checkbox"/> WALK-IN
<input type="checkbox"/> ADVERTISEMENT	<input type="checkbox"/> RELATIVE	<input type="checkbox"/> OTHER _____
LAST NAME	FIRST NAME	MIDDLE NAME
ADDRESS	STREET	
CITY	STATE	ZIP
TELEPHONE NUMBER(S)	E-MAIL ADDRESS	CELL PHONE

WHO TO NOTIFY IN CASE OF AN EMERGENCY

NAME: _____ RELATION: _____

ADDRESS: _____ PHONE: _____

IF YOU ARE UNDER 18 YEARS OF AGE, CAN YOU PROVIDE PROOF OF YOUR ELIGIBILITY TO WORK?

YES NO

HAVE YOU EVER FILLED OUT AN APPLICATION WITH US BEFORE?

YES NO

IF YES, GIVE DATE: _____

HAVE YOU EVER BEEN EMPLOYED WITH US BEFORE?

YES NO

IF YES, GIVE DATE: _____

ARE YOU CURRENTLY EMPLOYED?

YES NO

MAY WE CONTACT YOUR PRESENT EMPLOYER?

YES NO



ON WHAT DATE WOULD YOU BE AVAILABLE TO WORK?

GIVE DATE: _____

ARE YOU AVAILABLE TO WORK?

- FULL TIME
- PART TIME
- SHIFT WORK
- TEMPORARY

ARE YOU CURRENTLY ON "LAY-OFF" STATUS AND SUBJECT TO RECALL?

- YES
- NO

CAN YOU TRAVEL IF A JOB REQUIRES IT?

- YES
- NO

HAVE YOU BEEN CONVICTED OF A FELONY OR MISDEMEANOR?

- YES
- NO

(EXCLUDING ANY CONVICTIONS FROM A JUVENILE COURT. APPLICANT MAY OMIT MARIJUANA RELATED CONVICTIONS IF SUCH CONVICTIONS ARE MORE THAN 2 YEARS OLD, AND ANY INFORMATION CONCERNING A REFERRAL TO, AND PARTICIPATION IN, ANY PRETRIAL OR POST-TRIAL DIVERSION PROGRAM)

IF YES, PLEASE PROVIDE DATE, CITY & STATE, AND DETAILS OF CONVICTION: _____

HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE LAST 7 YEARS?

A CONVICTION WILL NOT NECESSARY DISQUALIFY AN APPLICANT FROM EMPLOYMENT

- YES
- NO

IF YES, PLEASE EXPLAIN: _____



HAVE YOU EVER HAD ANY JOB-RELATED TRAINING IN THE UNITED STATES MILITARY?

YES

NO

IF YES, PLEASE EXPLAIN: _____

ARE YOU PHYSICALLY OR OTHERWISE ABLE TO PERFORM THE DUTIES OF THE JOB FOR WHICH YOU ARE APPLYING?

YES

NO



EDUCATION

	ELEMENTARY SCHOOL	HIGH SCHOOL	UNDERGRADUATE COLLEGE / UNIVERSITY	GRADUATE / PROFESSIONAL
SCHOOL NAME AND LOCATION				
YEARS COMPLETED	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
DIPLOMA / DEGREE				
DESCRIBE COURSE OF STUDY				
DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP, SKILLS, AND EXTRA-CURRICULAR ACTIVITIES				
DESCRIBE ANY HONORS YOU HAVE RECEIVED				
STATE ANY ADDITIONAL INFORMATION YOU FEEL MAY BE HELPFUL TO US IN CONSIDERING YOUR APPLICATION				

INDICATE ANY FOREIGN LANGUAGES YOU CAN SPEAK, READ, AND / OR WRITE			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

LIST PROFESSIONALS, TRADE, BUSINESS OR CIVIC ACTIVITIES AND OFFICES HELD.
 YOU MAY EXCLUDE MEMBERSHIPS WHICH WOULD REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, ANCESTRY, HANDICAP, OR OTHER PROTECTED STATUS:



REFERENCES

GIVE NAME, ADDRESS, AND TELEPHONE NUMBER OF THREE REFERENCES WHO ARE NOT RELATED TO YOU AND ARE NOT PREVIOUS EMPLOYERS.

1. _____
2. _____
3. _____

EMPLOYMENT EXPERIENCE

START WITH YOUR PRESENT OR LAST JOB. INCLUDE ANY JOB-RELATED MILITARY SERVICE ASSIGNMENTS AND VOLUNTEER ACTIVITIES. YOU MAY EXCLUDE ORGANIZATIONS WHICH INDICATE RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, HANDICAP OR OTHER PROTECTED STATUS.

EMPLOYER		DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE / SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				
EMPLOYER		DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE / SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				
EMPLOYER		DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE / SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				



EMPLOYER		DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE / SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				
EMPLOYER		DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS				
TELEPHONE NUMBER(S)		HOURLY RATE / SALARY		
		STARTING	FINAL	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				

IF YOU NEED ADDITIONAL SPACE, PLEASE CONTINUE ON A SEPARATE SHEET OF PAPER.

SPECIAL SKILLS AND QUALIFICATIONS

SUMMARIZE SPECIAL JOB-RELATED SKILLS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR OTHER EXPERIENCES.



HIRING AND EMPLOYMENT POLICIES OF WOODLAND WELDING WORKS

THANK YOU FOR CONSIDERING WOODLAND WELDING WORKS AS A POTENTIAL EMPLOYER. HERE WE HAVE PROVIDED A CHECKLIST OF IMPORTANT COMPONENTS OF THE HIRING PROCESS. PLEASE REVIEW THESE POLICIES AND CHECK THE BOX AT THE LEFT TO NOTE THAT YOU HAVE READ AND UNDERSTAND THEM.

- WOODLAND WELDING WORKS IS AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER WHICH SELECTS THE INDIVIDUAL WHO IS THE BEST MATCH FOR A POSITION BASED ON JOB-RELATED QUALIFICATIONS, WITHOUT REGARD TO RACE, COLOR, CREED, SEX, NATIONAL ORIGIN, RELIGION, SEXUAL PREFERENCE, AGE, DISABILITY, OR OTHER PROTECTED GROUP STATUS.

- IF YOU ARE THE SUCCESSFUL APPLICANT FOR THIS POSITION OR FOR ANY OTHER POSITION, WOODLAND WELDING WORKS WILL CONTACT YOU BY TELEPHONE, LETTER, OR EMAIL TO EXTEND AN OFFER OF EMPLOYMENT TO YOU. THE OFFER LETTER WILL PROVIDE AN OVERVIEW OF TERMS AND CONDITIONS OF EMPLOYMENT.

- LIKE SUBSTANTIALLY ALL AMERICAN EMPLOYERS, WOODLAND WELDING WORKS EMPLOYS ITS PERSONNEL "AT WILL." THIS MEANS THAT YOU ARE FREE TO LEAVE YOUR EMPLOYMENT WITH WOODLAND WELDING WORKS AT ANY TIME, AND WOODLAND WELDING WORKS IS FREE TO TERMINATE YOUR EMPLOYMENT AT ANY TIME. THE PERIOD UPON WHICH COMPENSATION IS BASED, E.G., HOURLY, MONTHLY, ANNUALLY, DOES NOT MODIFY AN EMPLOYEE'S AT WILL STATUS.

- WOODLAND WELDING WORKS EMBRACES A ZERO TOLERANCE POLICY ON HARASSMENT. THIS MEANS THAT ANY HARASSMENT OF FELLOW EMPLOYEES, CUSTOMERS, VENDORS, OR ANYONE ASSOCIATED IN ANY WAY WITH WOODLAND WELDING WORKS IS STRICTLY PROHIBITED. ALL COMPLAINTS OF HARASSMENT WILL BE PROMPTLY, FULLY AND FAIRLY INVESTIGATED. PERSONS FOUND GUILTY OF HARASSMENT OF ANY KIND INCLUDING, WITHOUT LIMITATION, HARASSMENT BASED UPON GENDER, RACE, OR SEXUAL ORIENTATION, ARE SUBJECT TO DISCIPLINE UP TO AND INCLUDING DISCHARGE.

- ANY MODIFICATIONS OF THE STANDARD POLICIES OF WOODLAND WELDING WORKS MUST BE APPROVED IN WRITING BY FELIX FRANCO, PRESIDENT OF WOODLAND WELDING WORKS. ANY MODIFICATIONS RELATED TO YOUR EMPLOYMENT SHOULD BE IN WRITING SIGNED BY YOU AND [THE DESIGNATED OFFICER, E.G., PRESIDENT].



- ANY INTENTIONAL FALSIFICATION, MISREPRESENTATION, OR DISTORTION MADE IN ANY COMPANY DOCUMENT, INCLUDING EMPLOYMENT APPLICATIONS, IS GROUNDS FOR IMMEDIATE DISCHARGE.

- WOODLAND WELDING WORKS MAINTAINS DEMOGRAPHIC DATA REGARDING ITS JOB APPLICATIONS IN ORDER TO COMPLY WITH APPLICABLE LAW AND TO ASSURE THAT WE PROVIDE EQUAL EMPLOYMENT OPPORTUNITY TO APPLICANTS. WE COLLECT THIS INFORMATION IN THE FIRST PART OF THE EMPLOYMENT APPLICATION AND CLEARLY IDENTIFY IT. THIS INFORMATION WILL BE SEPARATED FROM YOUR APPLICATION AND NONE OF IT WILL, UNDER ANY CIRCUMSTANCES, BE USED IN MAKING HIRING DECISIONS.

- ALL POLICIES OF WOODLAND WELDING WORKS ARE IN WRITING. THEY ARE CONTAINED IN THE EMPLOYEE HANDBOOK [OR ARE DISTRIBUTED TO EMPLOYEES AT THE TIME OF EMPLOYMENT]. YOU SHOULD NOT RELY UPON ANY ORAL REPRESENTATIONS MADE TO YOU BY ANYONE IN THE COMPANY, IF THE REPRESENTATION IS CONTRARY TO THE WRITTEN POLICY.

- DRUG AND ALCOHOL ABUSE IS, SADLY, WIDESPREAD THROUGHOUT THE COUNTRY COSTING EMPLOYERS MILLIONS OF DOLLARS ANNUALLY IN MEDICAL COSTS, LOST PRODUCTIVITY, AND THE LIKE. WOODLAND WELDING WORKS MAY AT ANY TIME ASK YOU TO SUBMIT TO A RANDOM DRUG TEST. LIKewise, IF WOODLAND WELDING WORKS EVER HAS REASON TO SUSPECT YOUR USE OF ILLEGAL DRUGS OR MISUSE OF LEGAL ONES, OR YOUR USE OF ALCOHOL DURING WORK HOURS, WOODLAND WELDING WORKS HAS THE RIGHT TO REQUIRE YOU TO SUBMIT TO DRUG AND/OR ALCOHOL TESTING. IF ANY EMPLOYEE IDENTIFIES A PROBLEM WITH SUBSTANCE ABUSE AND IS COMMITTED TO SEEKING TREATMENT, THE EMPLOYEE MAY CONSULT PRIVATELY WITH FELIX FRANCO. WOODLAND WELDING WORKS WILL MAKE ACCOMMODATION FOR TREATMENT.

I HEREBY ACKNOWLEDGE THAT I UNDERSTAND THE FOREGOING POLICIES AND PRINCIPLES, AND HAVE INDICATED MY UNDERSTANDING BY CHECKING THE APPROPRIATE BOXES. I UNDERSTAND THAT COMPLIANCE WITH THE FOREGOING, AS APPLICABLE, IS A MATERIAL TERM AND CONDITION OF MY EMPLOYMENT.

CANDIDATE'S SIGNATURE: _____

DATE: _____



APPLICANT'S STATEMENT

I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION.

THIS APPLICATION FOR EMPLOYMENT SHALL BE CONSIDERED ACTIVE FOR A PERIOD OF TIME NOT TO EXCEED 45 DAYS. ANY APPLICANT WISHING TO BE CONSIDERED FOR EMPLOYMENT BEYOND THIS TIME PERIOD SHOULD INQUIRE AS TO WHETHER OR NOT APPLICATIONS ARE BEING ACCEPTED AT THAT TIME.

I HEREBY ACKNOWLEDGE THAT ANY EMPLOYMENT RELATIONSHIP WITH THIS COMPANY IS AN "AT WILL" NATURE, WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND THE EMPLOYER MAY DISCHARGE EMPLOYEE AT ANY TIME WITH OR WITHOUT CAUSE. IT IS FURTHER UNDERSTOOD THIS "AT WILL" EMPLOYMENT RELATIONSHIP MAY NOT BE CHANGED BY ANY WRITTEN DOCUMENT OR BY CONDUCT UNLESS SUCH CHANGE IS SPECIFICALLY ACKNOWLEDGED IN WRITING BY AN AUTHORIZED EXECUTIVE OF THE COMPANY.

IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW(S) MAY RESULT IN DISCHARGE. I UNDERSTAND, ALSO, THAT I AM REQUIRED TO ABIDE BY ALL RULES AND REGULATIONS OF THE EMPLOYER.

SIGNATURE OF APPLICANT

DATE

FOR PERSONNEL DEPARTMENT USE ONLY

ARRANGE INTERVIEW Yes No

REMARKS _____

EMPLOYED Yes No DATE OF EMPLOYMENT _____

JOB TITLE _____ SALARY _____ DEPARTMENT _____

BY _____

NAME AND TITLE

DATE

NOTES: _____

