



Sample Application

PRINT NAME (LAST) (FIRST) (MIDDLE)		TELEPHONE NUMBER	
ADDRESS (NO. & STREET) (CITY) (STATE) (ZIP)			
DRIVER LICENSE (optional)	SOCIAL SECURITY NO. (optional)	WAGE EXPECTED	CAN YOU, AFTER EMPLOYMENT, SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN U.S.? YES NO
POSITION DESIRED		CAN YOU PROVIDE PROOF OF AGE UPON EMPLOYMENT? YES NO	
OTHER POSITIONS FOR WHICH YOU ARE QUALIFIED			DATE AVAILABLE
WHAT HOURS, DAYS, SHIFTS ARE YOU WILLING TO WORK?		LOCATION DESIRED	WILLING TO RELOCATE? YES NO
OTHER LANGUAGES? SPEAK READ WRITE			
OTHER QUALIFICATIONS OR INFORMATION YOU CONSIDER IMPORTANT, SUCH AS SPECIAL SKILLS, TOOLS YOU CAN USE, EQUIPMENT YOU CAN OPERATE THAT RELATES TO THE JOB YOU ARE APPLYING FOR:			
MILITARY			
BRANCH OF SERVICE	FROM	TO	MILITARY OCCUPATION/RANK
DO YOU HAVE ANY PHYSICAL CONDITION OR DISABILITY THAT REQUIRES ANY ACCOMMODATIONS? IF YES, PLEASE EXPLAIN:			
REFERENCES (LIST PERSONS NOT RELATED TO YOU AND WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR)			
FULL NAME	COMPLETE ADDRESS	TELEPHONE	OCCUPATION YEARS

EDUCATION: HIGH SCHOOL DIPLOMA OR EQUIVALENT? YES NO IF "NO," NUMBER OF YEARS COMPLETED _____ LIST ALL COURSES YOU HAVE COMPLETED OR ARE CURRENTLY ENROLLED IN THAT RELATE TO THE POSITION YOU ARE APPLYING FOR: ATTACH AN ADDITIONAL SHEET IF NECESSARY TO LIST ALL COURSES COMPLETED.					
POST HIGH SCHOOL NAME AND LOCATION OF COLLEGES OR SCHOOLS ATTENDED	DATES ATTENDED	CREDITS COMPLETED SEM. UNITS QTR. UNITS	MAJOR SUBJECT OR COURSE	UNITS COMPLETED IN MAJOR	DEGREES OR CERTIFICATES RECEIVED
	From To:				

EXPERIENCE: BEGIN WITH YOUR MOST RECENT JOB, THEN ALL JOBS HELD AND ANY PERIODS OF UNEMPLOYMENT IN THE LAST TEN YEARS. ALSO LIST PAID OR VOLUNTEER EXPERIENCE RELATED TO THE JOB FOR WHICH YOU ARE APPLYING. PLEASE LIST SEPARATELY THE JOB TITLE FOR EACH JOB ON WHICH YOU HAVE BEEN EMPLOYED. DO NOT GROUP YOUR EXPERIENCES. IF ADDITIONAL SPACE IS NEEDED, ATTACH A SECOND SHEET TO YOUR APPLICATION.						
JOB TITLE (for each job use a separate section)	FROM: MO. YR.	TO: MO. YR.	Total Worked Yrs. Mo.	Hrs A Wk	Wage	
EMPLOYER	DUTIES					
EMPLOYER ADDRESS						
CITY STATE						
REASON FOR LEAVING	Are You Employed By This Company Now? Yes No If "Yes" May We Contact Your Employer? Yes No Supervisor's Name:				Number Supervised:	
JOB TITLE	FROM: MO. YR.	TO: MO. YR.	Total Worked Yrs. Mos.	Hrs Per Wk	Wage	
EMPLOYER	DUTIES					
EMPLOYER ADDRESS						
CITY STATE						
REASON FOR LEAVING	Are You Employed By This Company Now? Yes No If "Yes" May We Contact Your Employer? Yes No Supervisor's Name: Phone Number:				Number Supervised:	

I CERTIFY THAT THE INFORMATION PROVIDED IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE THIS COMPANY TO CHECK ANY SOURCE(S) NECESSARY TO DETERMINE THE ACCURACY OF STATEMENTS AND/OR INFORMATION PROVIDED. I UNDERSTAND ANY MISREPRESENTATION CAN RESULT IN IMMEDIATE TERMINATION.	
SIGNATURE	DATE

2211 H Street Bakersfield, CA 93301 | EmployersTrainingResource.com

This Workforce Innovation and Opportunity Act Equal Opportunity Youth program is funded by the U.S. Department of Labor's Employment and Training Administration as part of an award totaling \$6,568,883 (100%) with \$0 (0%) state, local, and/or non-federal sources. Auxiliary aids and services available upon request.



Sample Application

PRINT NAME (LAST) Smith		(FIRST) John		(MIDDLE) A.		TELEPHONE NUMBER (661) 555-1212	
ADDRESS (NO. & STREET) 2100 Main Street		(CITY) Bakersfield		(STATE) CA		(ZIP) 93301	
DRIVER LICENSE (optional) D652412		SOCIAL SECURITY NO. (optional) 858-12-XXXX or Provide Upon Hire		WAGE EXPECTED \$10.00 / Hour		CAN YOU, AFTER EMPLOYMENT, SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN U.S.? (YES) NO	
POSITION DESIRED Cashier				CAN YOU PROVIDE PROOF OF AGE UPON EMPLOYMENT? (YES) NO			
OTHER POSITIONS FOR WHICH YOU ARE QUALIFIED Stock Clerk						DATE AVAILABLE Aug. 14, 2022	
WHAT HOURS, DAYS, SHIFTS ARE YOU WILLING TO WORK? 4:00-9:00 PM Monday thru Friday and All day Saturday & Sunday				LOCATION DESIRED Bakersfield		WILLING TO RELOCATE? (YES) NO	
OTHER LANGUAGES? Spanish (SPEAK) (READ) WRITE							
OTHER QUALIFICATIONS OR INFORMATION YOU CONSIDER IMPORTANT, SUCH AS SPECIAL SKILLS, TOOLS YOU CAN USE, EQUIPMENT YOU CAN OPERATE THAT RELATES TO THE JOB YOU ARE APPLYING FOR: Good customer service skills, able to operate a cash register / calculator, able to sweep and mop floors, use cleaners to clean surfaces and items, eager to work.							
MILITARY N/A							
BRANCH OF SERVICE N/A		FROM N/A		TO N/A		MILITARY OCCUPATION/RANK N/A	
DO YOU HAVE ANY PHYSICAL CONDITION OR DISABILITY THAT REQUIRES ANY ACCOMMODATIONS? No IF YES, PLEASE EXPLAIN:							
REFERENCES (LIST PERSONS NOT RELATED TO YOU AND WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR)							
FULL NAME		COMPLETE ADDRESS		TELEPHONE		OCCUPATION	
Mr. Mario Sanchez		500 School Way, Bakersfield CA 93301		(661)555-1255		Wood Shop Teacher at BHS	
Mr. Jim Sykes		1585 "A" Street, Bakersfield CA 93305		(661)555-5876		Supervisor	
EDUCATION: HIGH SCHOOL DIPLOMA OR EQUIVALENT? YES (NO) IF "NO," NUMBER OF YEARS COMPLETED 11 LIST ALL COURSES YOU HAVE COMPLETED OR ARE CURRENTLY ENROLLED IN THAT RELATE TO THE POSITION YOU ARE APPLYING FOR: ATTACH AN ADDITIONAL SHEET IF NECESSARY TO LIST ALL COURSES COMPLETED.							
POST HIGH SCHOOL NAME AND LOCATION OF COLLEGES OR SCHOOLS ATTENDED		DATES ATTENDED		CREDITS COMPLETED SEM. UNITS QTR. UNITS		MAJOR SUBJECT OR COURSE	
N/A		From To:		N/A N/A		N/A	
EXPERIENCE: BEGIN WITH YOUR MOST RECENT JOB, THEN ALL JOBS HELD AND ANY PERIODS OF UNEMPLOYMENT IN THE LAST TEN YEARS. ALSO LIST PAID OR VOLUNTEER EXPERIENCE RELATED TO THE JOB FOR WHICH YOU ARE APPLYING. PLEASE LIST SEPARATELY THE JOB TITLE FOR EACH JOB ON WHICH YOU HAVE BEEN EMPLOYED. DO NOT GROUP YOUR EXPERIENCES. IF ADDITIONAL SPACE IS NEEDED, ATTACH A SECOND SHEET TO YOUR APPLICATION.							
JOB TITLE (for each job use a separate section) Cashier		FROM: MO. 10 YR. 2011		TO: MO. 12 YR. 2011		Total Worked Yrs. Mo. 2 Hrs A Wk 25 Wage \$8.00/ Hr	
EMPLOYER The Bakersfield Toy Store		DUTIES Assist customers with purchases, operate a cash register, bag items for carry-out, locate products for customers, clean restrooms, sweep and mop floors, keep work area clean, remove trash when needed, and gather carts from the parking lot.					
EMPLOYER ADDRESS 6989 Toy Avenue							
CITY Bakersfield STATE CA							
REASON FOR LEAVING Seasonal Work - Job Ended		Are You Employed By This Company Now? Yes (No) If "Yes" May We Contact Your Employer? (Yes) No Supervisor's Name: Mr. Bill Davis Phone Number: (661)555-1111 Number Supervised: 0					
JOB TITLE Babysitter		FROM: MO. 08 YR. 2010		TO: MO. Now YR.		Total Worked Yrs. Mos. 2 Hrs Per Wk 10-12 Wage \$8.00/ Hr	
EMPLOYER Mr. & Mrs. Sykes		DUTIES Take care of a 16 month old child. Change diapers, feed, play and read to baby.					
EMPLOYER ADDRESS 2105 Main Street							
CITY Bakersfield STATE CA							
REASON FOR LEAVING Currently employed at various times.		Are You Employed By This Company Now? (Yes) No If "Yes" May We Contact Your Employer? (Yes) No Supervisor's Name: Mr. Jim Sykes Phone Number: (661)555-5876 Number Supervised: 0					
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SIGNATURE John A. Smith				DATE May 26, 2021			

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