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Employment Application
 An equal opportunity and affirmative action employer

Personal Information

Last Name	First Name	Middle Initial	Date
Home Phone	Business Phone	E-mail address	
Permanent Address	City	State	Zip Code

If you are not a citizen of the United States, are you eligible to work in the U.S. and would you be able to provide the necessary documents of proof of the legal right to work upon hire? Yes No

Are you under 18? Yes No If you are under 18 and still in high school, you may be required to provide a work permit upon hire.

Have you ever been convicted of a felony? Yes No

 If YES, give date, place, offense, and outcome. (Previous convictions do not necessarily disqualify an applicant from employment.)

Employment Interest

Position Applied For	Salary Desired	Date Available

How did you hear about this position? _____

Education and Training

Name of High School, Technical School, and College	City, State	Course of Study	Total Years of Study	Degree/ Diploma

List any seminars, classes or other education not listed above which may help qualify you for this position: _____

Employment History

Please list most recent employer first.

Company Name	Street Address
City	State / Zip Code
Job Title	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Supervisor's Name and Title	Phone number
Reason for Leaving	

Job Duties	Dates of Employment:	From (mo/yr)	To (mo/yr)
	Starting Salary	Ending Salary	

Company Name	Street Address
City	State / Zip Code
Job Title	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Supervisor's Name and Title	Phone number
Reason for Leaving	

Job Duties	Dates of Employment:	From (mo/yr)	To (mo/yr)
	Starting Salary	Ending Salary	

References

Name	Email Address	Phone	Business Relationship

I certify that the information contained in this application is correct to the best of my knowledge, and I understand that any misstatement or omission of information is grounds for ending the hiring process or dismissal. I authorize verification of information provided on this application; and authorize the references listed above to give you all pertinent information concerning my previous employment; and release all parties from all liability for any damage that may result from furnishing same to Porter Scott. In consideration of my employment, I agree to conform to the rules and regulations of Porter Scott. I further agree that either I or the Company may terminate my employment with or without cause and with or without prior notice, at any time. Finally, I understand that no representative of the company other than an Executive Officer has the authority to enter into any agreement for employment for any specified period of time, or to otherwise alter the foregoing.

Signature

Date