

## EMPLOYMENT APPLICATION



### 1. Employer Information

Employer: AA Sign Image, Inc.  
Address: 1250 S. Wilson Way, Unit E-1  
City/State/ZIP: Stockton, CA 95205  
Telephone: (209) 983-5023

It is the policy of AA Sign Image, Inc. to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

### 2. Applicant Information

Applicant Name:  
Home Address:  
City/State/ZIP:  
Daytime Phone: Evening Phone:  
Mobile Phone:  
Social Security #:

### 3. Emergency Contact

Contact Name:  
Relationship:  
Address:  
City/State/ZIP:  
Daytime Phone: Evening Phone:

4. Job Position Applied for:  Full Time  Part Time

5. Salary Desired: \$ per

6. Who referred you to our company?  Yes  No

Do you have friends or relatives who work here? If yes, please list here:

7. Have you applied to our company previously?  Yes  No

If yes, when?

8. Are you at least 18 years old?  Yes  No

9. Are you willing to work any shift, including nights and weekends?  Yes  No

If no, please state any limitations:

10. If applicable, are you available to work overtime and out of town?  Yes  No

11. If you are offered employment, when would you be available to start?

12. If hired, are you able to submit proof that you are legally eligible for employment in the United States?  Yes  No

13. Are you able to perform the essential functions of the job position you seek with or without reasonable accommodations?  Yes  No

What reasonable accommodation, if any, would you request?

#### 14. Applicant's Skills

List any skills that may be useful for the job you are seeking. Enter the number of years of experience and circle the number which corresponds to your ability for each skill ("1" represents poor ability, while "5" represents exceptional ability).

Skill

Years of Experience

Ability/Rating

1 2 3 4 5

1 2 3 4 5

1 2 3 4 5

## 15. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back of this application.

Employer Name:

Supervisor Name:

Address:

City/State/ZIP:

Job Duties:

Reason for Leaving:

Dates Employed:

Employer Name:

Supervisor Name:

Address:

City/State/ZIP:

Job Duties:

Reason for Leaving:

Dates Employed:

Employer Name:

Supervisor Name:

Address:

City/State/ZIP:

Job Duties:

Reason for Leaving:

Dates Employed:

## 16. Applicant's Education and Training

College/University name and address

Did you receive a degree?

Yes

No

If yes, degree(s) received?

High School/GED name and address

Did you receive a degree?  Yes  No

Other Training (Graduate, Technical, Vocational)

Please indicate any current professional licenses or certificates that you hold:

Awards, Honors, Special Achievements:

17. Please provide any other information that you believe should be considered, including whether you are bound by a arrangement with any current employer:

AA Sign Image