



Application for Employment

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Personal Information	Last Name		First Name		Middle Initial	Today's Date	
	Present Street Address (Do not list P.O. Box)		City	State	County	Zip Code	
	Email Address		Cell Phone		Home Phone		
	Are you under 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, you will be required to provide a work permit.</i>			Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Proof of legal authority to work in the United states will be required upon employment.</i>			
	Available Start Date:		Type of Position Requested:			Have you ever been employed by RMA? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give dates: _____	
	Requested Rate of Pay: \$ _____ per _____		<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Temporary		
			<input type="checkbox"/> 1 st Shift	<input type="checkbox"/> 2 nd Shift	<input type="checkbox"/> 3 rd Shift		
			<input type="checkbox"/> Seasonal	<input type="checkbox"/> Any			
	Referred By: (Please check applicable box and specify if other source)						
	<input type="checkbox"/> Newspaper, please specify _____			<input type="checkbox"/> Agency			
<input type="checkbox"/> Company Internet Site _____			<input type="checkbox"/> Other Internet Site, please specify _____				
<input type="checkbox"/> RMA Employee _____			<input type="checkbox"/> School, please specify _____				
Position Applied for: _____							
Facility:							
Rescue Missions - <input type="checkbox"/> Ventura County <input type="checkbox"/> Lighthouse for Women & Children <input type="checkbox"/> San Fernando Valley <input type="checkbox"/> Central Coast <input type="checkbox"/> Victor Valley							
Thrift Stores - <input type="checkbox"/> Oxnard Mission Bargain Center <input type="checkbox"/> Oxnard Super Thrift <input type="checkbox"/> North Hollywood Super Thrift <input type="checkbox"/> Reseda Super Thrift <input type="checkbox"/> Sun Valley Super Thrift <input type="checkbox"/> Santa Maria Super Thrift <input type="checkbox"/> Victor Valley Super Thrift							
Other - <input type="checkbox"/> Valley Food Bank <input type="checkbox"/> Rescue Mission Alliance Corporate Office							
Are you able to meet the attendance requirements of the position? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Will you work overtime if required? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain							
Driver's License number if driving is an essential job function:					State:		

List last three (3) schools attended, starting with the most recent. List number of years completed. Indicate degree or diploma earned, if any. Grade Point Average or Class Rank. Major fields of study. Minor field of study (if applicable)

Education	School	# years completed	Graduated Y / N	GPA Class Rank	Major	Minor

Provide the following information for your past and current employers, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below. **Do not use "See Resume" in lieu of completing this form.**

Employment History	Employer:	Dates of Employment: From	To	
	Address:	City, State, Zip Code:		
	Your Job Title:	Reason for leaving:		
	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Supervisor:	Title:	
	Email:	Telephone: ()		
	Summarize the type of work:			
	Employer:	Dates of Employment: From	To	
	Address:	City, State, Zip Code:		
	Your Job Title:	Reason for leaving:		
	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Supervisor:	Title:	
	Email:	Telephone: ()		
	Summarize the type of work:			
	Employer:	Dates of Employment: From	To	
	Address:	City, State, Zip Code:		
	Your Job Title:	Reason for leaving:		
	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Supervisor:	Title:	
	Email:	Telephone: ()		
	Summarize the type of work:			
Comments: (Including explanation of any gaps in employment)				

List name, telephone, and years known of three references (other than those listed above) who are not related to you.

References	Name	Relationship	Company	Telephone	Years Known

List professional, trade, business, or civic associations and any offices held.

Exclude memberships that would reveal sex, race, religion, national origin, age, color, disability, or any other similarity protected status.

Associations	Organization	Certificates / Offices Held

Skills and Qualifications – Summarize any special training, skills, license and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Skills	
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I understand and agree that if it is subsequently discovered that the information is untrue or that I have failed to disclose a material fact, any offer of employment made to me by Rescue Mission Alliance may be immediately withdrawn or if I am already employed by Rescue Mission Alliance, I may be subject to immediate dismissal at Rescue Mission Alliance's option. In such event, the withdrawal of any offer of employment made to me or the termination of employment shall be without any obligation or liability to me by Rescue Mission Alliance, other than for wages at the rate agreed upon for work I have actually performed.

I give the employer the right to contact and obtain information from all references, employers, educational institutions, DMV records (for driver position), and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

I understand that, if offered employment, I will be required to sign an agreement requiring me to arbitrate almost all claims I might have against the Company in the future. I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by the Company, that all disputes that might arise out of my hire, employment or termination by the Company, whether during or after the employment, that cannot be resolved by informal internal resolution, will be submitted to binding arbitration. I agree that such arbitration shall be conducted under the rules as further explained in the Arbitration Agreement I will receive if offered employment.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand and acknowledge that any employment relationship with Rescue Mission Alliance will be "employment at will." This means that I may resign at any time and you, the employer, may discharge me at any time, with or without cause, and with or without advance notice. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____

Date _____