



6356 N. Fresno Street, Fresno, CA 93710
 Phone: (559) 439-5500 • Fax: (559) 439-1018
 www.SANMARprop.com

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, veteran status or any other legally protected status.

PLEASE PRINT

GENERAL INFORMATION			
Full Name:		Phone:	
		Email:	
Current Address:	City	State	Zip
			How Long (MO/YR to MO/YR) From ___/___ to ___/___
Previous Address:	City	State	Zip
			How Long (MO/YR to MO/YR) From / to /
What has been your most interesting work?		What made it interesting?	
What work experience did you dislike most?		Why did you dislike it?	
Have you ever been a defendant in an unlawful detainer (eviction) lawsuit or defaulted (failed to perform) any obligation of a rental agreement or lease? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been terminated, asked to resign or suspended from a job? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, give dates and circumstances:			
You will be required to furnish proof that you are legally authorized to work in the United States. Can you furnish such proof? <input type="checkbox"/> Yes <input type="checkbox"/> No			
POSITION			
What position or type of work are you seeking?		How did you learn of the position you are seeking?	Are you over 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you interested in: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> On Call <input type="checkbox"/> Temporary		Willing to work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No	
What days & hours are you willing to work? Mon: From ___ To ___ Tues: From ___ To ___ Wed: From ___ To ___ Thurs: From ___ To ___ Fri: From ___ To ___ Sat: From ___ To ___ Sun: From ___ To ___			
		Date available to work:	Are you presently on lay-off from another job and subject to recall? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever applied here before? <input type="checkbox"/> Yes <input type="checkbox"/> No When		Have you previously been employed here? <input type="checkbox"/> Yes <input type="checkbox"/> No When: _____ Under what name: _____	
Are you presently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	May we inquire of your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have relatives working here (will not necessarily disqualify employment)? <input type="checkbox"/> Yes <input type="checkbox"/> No – Name: _____ Relationship: _____	
EDUCATION AND SKILLS			
Check the boxes that indicate all levels of completed education: <input type="checkbox"/> High School <input type="checkbox"/> Some Graduate or GED School: _____ <input type="checkbox"/> College Degree: _____ <input type="checkbox"/> College Major: _____		<input type="checkbox"/> Trade or Business School	School: _____ Field of Study: _____
List certificates or licenses you hold or specialized training you have completed that may help qualify you for employment:			
List job-related professional or technical organizations to which you belong:			
Specialized Skills: <input type="checkbox"/> PC <input type="checkbox"/> Word <input type="checkbox"/> Excel <input type="checkbox"/> Other Computer Skill Level: <input type="checkbox"/> Beginning <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced			
Bilingual <input type="checkbox"/> Yes <input type="checkbox"/> No Language:		Typing: _____ WPM	

PLEASE COMPLETE THE FOLLOWING PAGES

EMPLOYMENT HISTORY

List All PERIODS of employment, self-employment, U.S. Military Service, volunteer work and ANY DATES NOT EMPLOYED starting with the MOST RECENT FIRST.

THIS SECTION MUST BE COMPLETED EVEN IF YOU ARE ATTACHING A RESUME		
From	Employer:	Supervisor's Name
	Address:	Reason For Leaving:
To		Position/Duties
	Telephone Number:	
From	Employer:	Supervisor's Name
	Address:	Reason For Leaving:
To		Position/Duties
	Telephone Number:	
From	Employer:	Supervisor's Name
	Address:	Reason For Leaving:
To		Position/Duties
	Telephone Number:	
From	Employer:	Supervisor's Name
	Address:	Reason For Leaving:
To		Position/Duties
	Telephone Number:	
From	Employer:	Supervisor's Name
	Address:	Reason For Leaving:
To		Position/Duties
	Telephone Number:	
From	Employer:	Supervisor's Name
	Address:	Reason For Leaving:
To		Position/Duties
	Telephone Number:	
From	Employer:	Supervisor's Name
	Address:	Reason For Leaving:
To		Position/Duties
	Telephone Number:	

PLEASE COMPLETE THE FOLLOWING PAGE

CERTIFICATION AND ACKNOWLEDGEMENT

"I hereby certify that all information submitted in this application form, or in any résumé, interview or other information, is true and complete and that I have not knowingly withheld, nor will I withhold, any information that would affect my application for employment. I understand that SAN MAR Properties, Inc. is under no obligation to consider or reconsider this application at any time, and that acceptance of my application does not constitute an offer of employment. If any information I have provided is untrue, or I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal. I also understand and agree that:

1. Inquiries may be made with my previous employers or others who may have knowledge of me, or with consumer credit, investigative or other private or governmental agencies. I authorize any such person or agency to give you any and all information concerning my previous employment, including, but not limited to, an assessment of my job performance, ability and fitness, and/or any other information they may have, personal or otherwise, and release all parties from any and all liability, claims, or damages that may directly or indirectly result from furnishing same. I understand that the reporting of an eviction, non-valid driver's license, non-valid auto insurance, subpar work performance, or any criminal activity including, but not limited to, theft, burglary, fraud, abuse, physical harm will result in the withdrawal of my application for employment, withdrawal from any provisional offer I may have received or termination of employment, dependent upon when the results were received. Upon my reasonable and timely request, a description of the general scope and nature of any such inquiry will be provided to me.

2. Prior to my beginning work or during my employment, employer reserves the right to require any lawful form of medical, drug, alcohol, psychological, character, honesty, integrity, aptitude, skill or other test or examination."

APPLICANT'S STATEMENT

I CERTIFY ALL INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT.

I understand SAN MAR Properties, Inc. maintains a zero tolerance for drug and alcohol abuse by its employees. Violation of this Drug and Alcohol Abuse Policy will lead to disciplinary procedures, up to and including termination of employment.

In the event of employment, I understand that any false or misleading information given by me in my application or interview(s) may result in disqualification for employment consideration or, if hired, may be grounds for discharge. I also understand that I am required to abide by all rules and policies of the employer.

"APPLICANT'S UNDERSTANDING OF AT-WILL EMPLOYMENT":

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for SAN MAR Properties, Inc. to hire me. If I am accepted for employment with SAN MAR Properties, Inc. that my employment can be terminated at any time with or without cause, and with or without notice, at the option of either SAN MAR or myself. I also understand and agree that if I am hired, SAN MAR retains the right to demote, transfer, change my job duties and change my compensation at any time with or without notice and with or without cause at its sole discretion."

SAN MAR Properties, Inc. is an equal opportunity employer. SAN MAR Properties, Inc. does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status, or unfavorable discharge from military service.

Signature

Date