Application for Employment

We are pleased that you are seeking employment with Premier Gear & Machining, Inc. Applicants for employment are considered without regard to race, color, religion, sex, age, sexual orientation, national origin, or any other factors prohibited by local, state, or federal law. We are proud to be an Equal Opportunity Employer.

Applicants with disabilities may be entitled to reasonable accommodation under the ADA and related state laws. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing an undue hardship on the company. Please contact Meghan Golden at: (951) 757-9696 or meghang@premiergearinc.com if you need assistance completing any forms or to otherwise participate in the application process.

This employment application does not create a contract or offer of employment. If hired, employment with the Company will be on an at-will basis and can be terminated at the will of either you or the Company.

Personal Information

_____ _____

Applicant Name *Phone Number*

_____ _____ _____ _____

Street Address *City* *State* *Zip Code*

_____ _____

Email Address *Cell Phone Number*

Please list all names you have used in the past:

Have you ever been employed by our Company? ☐ Yes, dates of employment: _____ ☐ No

How did you hear about our company and/or this job opening?

_____

Have you ever applied for employment at our Company? ☐ Yes, dates applied: _____ ☐ No

Do you have any friends or relatives employed by this company? ☐ Yes ☐ No

If yes, please provide their names and relationship to you:

_____

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Employment Desired

Position applying for:

Date Available: _____ Salary Desired: $ _____

Are you interested in ☐ Temporary ☐ Full-Time ☐ Part-Time ☐ Seasonal

What days and hours are you available to work?

Are you available to work: On weekends? ☐ Yes ☐ No Overtime? ☐ Yes ☐ No

Education

List your education history starting with your highest level of education. Attach a separate sheet if necessary. You must complete this section even if attaching a resume.

Institution #1

_____
Institution Name

_____
Degree(s) Earned

Institution #2

_____
Institution Name

_____
Degree(s) Earned

Experience

List present and past employment starting with your most recent employer (last five years is sufficient). Attach separate sheet if necessary. You must complete this section even if attaching a resume.

Employer #1

_____ _____
Employer Name *Phone Number*

_____ _____
Type of Business *Your Supervisor's Name*

_____ _____ _____ _____
Street Address *City* *State* *Zip Code*

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Dates of Employment:

From *To*

Current Employer? ☐ Yes ☐ No May we contact this employer for a reference? ☐ Yes ☐ No

Your position and duties

Your reason for leaving

Employer #2

Employer Name *Phone Number*

Type of Business *Your Supervisor's Name*

Street Address *City* *State* *Zip Code*

Dates of Employment:

From *To*

May we contact this employer for a reference? ☐ Yes ☐ No

Your position and duties

Your reason for leaving

Employer #3

Employer Name *Phone Number*

Type of Business *Your Supervisor's Name*

Street Address *City* *State* *Zip Code*

Dates of Employment:

From *To*

May we contact this employer for a reference? ☐ Yes ☐ No

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Your position and duties

Your reason for leaving

References

Please list three (3) individuals who are not related to you and have knowledge of your work performance and work experience, preferably former supervisors:

Reference #1

Reference Name *Phone Number*

Company *Position*

Reference #2

Reference Name *Phone Number*

Company *Position*

Reference #3

Reference Name *Phone Number*

Company *Position*

Skills and Qualifications

Do you have any licenses, skills, training, or awards that are relevant to the job for which you are applying?

Do you speak, write or understand any foreign languages? ☐ Yes ☐ No

If yes, describe which language(s) and how fluent of a speaker you consider yourself to be:

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Can you perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? ☐ Yes ☐ No

If no, please describe the functions that cannot be performed:

_____

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

Can you meet the attendance requirements of this job? ☐ Yes ☐ No

APPLICANT'S CERTIFICATION AND SIGNATURE

Please read carefully, initial each paragraph and sign at the bottom of the page.

_____ I understand that, if hired, I will be required to provide proof of my legal authorization to work in the United States.

_____ I certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the information provided by me on this application are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I authorize the Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment. I further authorize the references I have listed to disclose to the Company all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I release the Company, my former employers and other persons, corporations, partnerships, and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in this application, or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between the Company and me. In addition, I understand and agree that if I am employed, my employment is at will and is for no definite or determinable period and may be terminated at any time, with or without prior notice, or with or without cause, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the Company unless made in writing and signed by me and the Company's designated representative.

_____ I understand that, in connection with my application for employment, the Company may obtain a consumer report and/or investigate consumer reports about me that may contain information as to my character, general reputation, personal characteristics, and mode of living. Such reports may include or consist of my driving history obtained from the Department of Motor Vehicles. I further understand that any job offer extended by the Company is contingent upon receipt of a favorable consumer or investigative consumer report about me.

_____ I understand that in connection with my application for employment, depending upon the position for which I have applied, any offer of employment is conditioned upon my taking and passing a post-offer/pre-employment drug test, and if necessary for the position for

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which I have applied, a post-offer/pre-employment medical examination. I understand that I may refuse to take any required pre-employment drug test and/or medical examination, but that if I do, any offer of employment will be immediately withdrawn.

_____ **I HAVE READ THE ABOVE PARAGRAPHS, UNDERSTAND THEIR IMPORTANCE AND EFFECT UPON MY EMPLOYMENT, AND ACCEPT SAME AS CONDITIONS OF MY EMPLOYMENT WITH COMPANY.**

This application, when completed and signed, becomes the property of the Company.

_____ _____

Applicant Signature Date

_____

Print Name

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