



851 S. A Street
 Oxnard, CA 93030
 Tel. 805.385.7244
 Fax 805.385.7246
 Email: info@amongfriends.org

EMPLOYMENT APPLICATION

Please sign and date the application, and provide all information requested.

(WE ARE AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION				
Name:			Date:	
Address:		City:		Zip:
Cell Phone No (Incl Area Code):		Home Phone No (Incl Area Code):		
Email:		Were you referred to us by anyone? If so, Who?		
How did you learn of the position available? <input type="checkbox"/> Among Friends Website <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Craigslist <input type="checkbox"/> Indeed <input type="checkbox"/> Other:				
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?				
Have you ever been involuntarily discharged from a position? If yes, explain			Are you legally authorized to work in the U.S.A.?	
Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If not, do you have a valid work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If so, please provide a copy of the work permit.				
EMPLOYMENT DESIRED				
Position Desired:		Available schedule: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> On – Call		Available beginning:
Have you ever applied for our company before? If yes, when and for what position?				
Do you have any friends or relatives working for our company? <input type="checkbox"/> No <input type="checkbox"/> Yes			If yes, list name and relationship?	
EDUCATION				
SCHOOL	NAME & LOCATION	GRADUATED		MAJOR SUBJECTS
		Yes	No	
College/University				
College/University				
High School				
Vocational / Other (specify)				
OTHER INFORMATION				
List any special skills that make you especially suited to work at our company (e.g. languages, technical skills, etc):				
Special training / Professional Certifications / Organizations / Accreditation:				
What machines or equipment can you operate that are related to the job for which you are applying?				
Why would you like to work for our company?				



851 S. A Street
 Oxnard, CA 93030
 Tel. 805.385.7244
 Fax 805.385.7246
 Email: info@amongfriends.org

EMPLOYMENT INFORMATION

Please include all employment information for the last 10 years beginning with most recent employer

Name of Employer:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:	Specific Duties:	
Your Title:	Telephone:	Supervisor Name:
Reason for leaving:	Employment Start Date:	Employment End Date:

Name of Employer:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:	Specific Duties:	
Your Title:	Telephone:	Supervisor Name:
Reason for leaving:	Employment Start Date:	Employment End Date:

Name of Employer:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:	Specific Duties:	
Your Title:	Telephone:	Supervisor Name:
Reason for leaving:	Employment Start Date:	Employment End Date:

Name of Employer:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:	Specific Duties:	
Your Title:	Telephone:	Supervisor Name:
Reason for leaving:	Employment Start Date:	Employment End Date:

UNEMPLOYMENT HISTORY

Please account for all times of unemployment during the last 10 years, both the exact periods of time & the corresponding reasons for unemployment. Please do not include periods of unemployment of one month or less, and do not include periods when you were going to school full-time.



851 S. A Street
Oxnard, CA 93030
Tel. 805.385.7244
Fax 805.385.7246
Email: info@amongfriends.org

AMONG FRIENDS ADHC CONSENT AND RELEASE FORM

DRUG TESTING:

It is Among Friends ADHC Center's policy, consistent with Federal Regulations, to require drug testing for applicants applying or transferring into position as a bus driver. Applicants for this position shall submit to a pre-employment drug test. An applicant will not be hired, nor will an employee be reassigned to a covered job function, until the company has been notified that the employee has passed the drug test result.

I understand and acknowledge that Among Friends ADHC Center's policy on drug/alcohol abuse requires that all applicants and/or employees may be tested as provided by the company's policy. I acknowledge that a confirmed positive test may cause me to be removed from the payroll and subject to discipline up to and including termination, or result in a recommendation to attend a rehabilitation program. I fully understand that if I should refuse to take the test, I could be suspended from my job without pay, or terminated for insubordination. I also understand that the test result will be kept in confidence and handled only by authorized management personnel.

BACKGROUND CHECKS:

BY SIGNING THIS APPLICATION, I HEREBY AGREE AS FOLLOWS:

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, AND AGREE TO HAVE ANY OF THE INFORMATION VERIFIED BY AMONG FRIENDS ADHC. I UNDERSTAND THAT ANY MISREPRESENTATION, FALSIFICATION, OR MATERIAL OMISSION OF INFORMATION ON THIS APPLICATION MAY RESULT IN MY FAILURE TO RECEIVE AN OFFER, IF I AM HIRED, MY IMMEDIATE DISMISSAL FROM EMPLOYMENT.

I AUTHORIZE THE REFERENCES LISTED ABOVE, AS WELL AS ALL OTHER INDIVIDUALS WHOM AMONG FRIENDS ADHC CONTACTS, TO PROVIDE ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY OTHER PERTINENT INFORMATION THAT THEY MAY HAVE.

I UNDERSTAND THAT ANY OFFER OF EMPLOYMENT IS CONDITIONED UPON PROOF OF IDENTITY, PROOF OF LEGAL AUTHORITY TO WORK IN THE UNITED STATES, AND SATISFACTORY COMPLETION OF MY BACKGROUND AND REFERENCE CHECK. (NOTE THAT CRIMINAL BACKGROUND CHECK CAN ONLY BE CONDUCTED AFTER A CONDITIONAL OFFER OF EMPLOYMENT HAS BEEN OFFERED)

APPLICANT SIGNATURE

DATE:

CONSUMER DISCLOSURE AND AUTHORIZATION FORM

Disclosure Regarding Background Investigation

American Trademark Corporation (the "Company") may request, for lawful employment purposes, background information about you from a consumer reporting agency in connection with your employment or application for employment (including independent contractor assignments, as applicable). This background information may be obtained in the form of consumer reports and/or investigative consumer reports (commonly known as "background reports"). These background reports may be obtained at any time after receipt of your authorization and, if you are hired or engaged by the Company, throughout your employment or your contract period.

HireRight, Inc., or another consumer reporting agency, will prepare or assemble the background reports for the Company. HireRight, Inc. is located and can be contacted by mail at 5151 California, Irvine, CA 92617, and HireRight can be contacted by phone at (800) 400-2761. Information about HireRight's privacy practices is available at www.hireright.com/Privacy-Policy.aspx.

The background report may contain information concerning your character, general reputation, personal characteristics, mode of living, and credit standing. The types of information that may be obtained include, but are not limited to: social security number verifications; address history; credit reports and history; criminal records and history; public court records; driving records; accident history; worker's compensation claims; bankruptcy filings; educational history verifications (e.g., dates of attendance, degrees obtained); employment history verifications (e.g., dates of employment, salary information, reasons for termination, etc.); personal and professional references checks; professional licensing and certification checks; drug/alcohol testing results, and drug/alcohol history in violation of law and/or company policy; and other information bearing on your character, general reputation, personal characteristics, mode of living and credit standing.

This information may be obtained from private and public record sources, including, as appropriate: government agencies and courthouses; educational institutions; former employers; personal interviews with sources such as neighbors, friends and associates; and other information sources. If the Company should obtain information bearing on your credit worthiness, credit standing or credit capacity for reasons other than as required by law, then the Company will use such credit information to evaluate whether you would present an unacceptable risk of theft or other dishonest behavior in the job for which you are being evaluated.

You may request more information about the nature and scope of any investigative consumer reports by contacting the Company. A summary of your rights under the Fair Credit Reporting Act is also being provided to you.

Additional State Law Notices

If you are a California, Maine, Massachusetts, New York or Washington State applicant, employee or contractor, please also note:

CALIFORNIA: Pursuant to section 1786.22 of the California Civil Code, you may view the file maintained on you by HireRight during normal business hours. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication services, by appearing at HireRight's offices in person, during normal business hours and on reasonable notice, or by certified mail. You may also receive a summary of the file by telephone, upon submitting proper identification and written request. HireRight has trained personnel available to explain your file to you, including any coded information, and will provide a written explanation of any coded information contained in your file. If you appear in person, you may be accompanied by one other person, provided that person furnishes proper identification. "Proper identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. If you cannot identify yourself with such information, HireRight may require additional information concerning your employment and personal or family history to verify your identity.

MAINE: You have the right, upon request, to be informed of whether an investigative consumer report was requested, and if one was requested, the name and address of the consumer reporting agency furnishing the report. You may request and receive from the Company, within five business days of our receipt of your request, the name, address and telephone number of the nearest unit designated to handle inquiries for the consumer reporting agency issuing an investigative consumer report concerning you. You also have the right, under Maine law, to request and promptly receive from all such agencies copies of any such reports.

MASSACHUSETTS: If we request an investigative consumer report, you have the right, upon written request, to a copy of the report.

NEW YORK: You have the right, upon written request, to be informed of whether or not an investigative consumer report was requested. If an investigative consumer report is requested, you will be provided with the name and address of the consumer reporting agency furnishing the report. You may inspect and receive a copy of the report by contacting that agency. Please click [here](#) for additional information about New York law, as applicable.

WASHINGTON STATE: If the Company requests an investigative consumer report, you have the right, upon written request made within a reasonable period of time after your receipt of this disclosure, to receive from the Company a complete and accurate disclosure of the nature and scope of the investigation requested by the Company. You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Authorization of Background Investigation

I have carefully read and understand this Disclosure and Authorization form and the attached summary of rights under the Fair Credit Reporting Act. By my signature below, I consent to preparation of background reports by a consumer reporting agency such as HireRight, Inc. (“HireRight”), and to the release of such background reports to the Company and its designated representatives and agents, for the purpose of assisting the Company in making a determination as to my eligibility for employment (including independent contractor assignments, as applicable), promotion, retention or for other lawful employment purposes. I understand that if the Company hires me or contracts for my services, my consent will apply, and the Company may, as allowed by law, obtain additional background reports pertaining to me, without asking for my authorization again, throughout my employment or contract period from HireRight and/or other consumer reporting agencies.

I understand that information contained in my employment or contractor application, or otherwise disclosed by me before or during my employment or contract assignment, if any, may be used for the purpose of obtaining and evaluating background reports on me. I also understand that nothing herein shall be construed as an offer of employment or contract for services.

I hereby authorize all of the following, without limitation, to disclose information about me to the consumer reporting agency and its agents: law enforcement and all other federal, state and local agencies, learning institutions (including public and private schools, colleges and universities), testing agencies, information service bureaus, credit bureaus, record/data repositories, courts (federal, state and local), motor vehicle records agencies, my past or present employers, the military, and all other individuals and sources with any information about or concerning me. The information that can be disclosed to the consumer reporting agency and its agents includes, but is not limited to, information concerning my employment and earnings history, education, credit history, motor vehicle history, criminal history, military service, professional credentials and licenses.

By my signature below, I also certify the information I provided on and in connection with this form is true, accurate and complete. I agree that this form in original, faxed, photocopied or electronic (including electronically signed) form, will be valid for any background reports that may be requested by or on behalf of the Company.

California, Minnesota or Oklahoma applicants only: Please check this box if you would like to receive (whenever you have such right under the applicable state law) a copy of your background report if one is obtained on you by the Company.

Applicant Last Name _____ First _____ Middle _____

Applicant Signature _____ Date _____