APPLICATION FOR EMPLOYMENT

PLEASE READ THIS APPLICATION THOROUGHLY AND COMPLETE IT HONESTLY.
THIS EMPLOYER PERFORMS A DETAILED BACKGROUND INVESTIGATION ON ALL FINAL CANDIDATES.

Important Notice: Applicants should be extremely careful as they complete this application. This Organization utilizes a sophisticated and detailed background and pre-employment investigation process. This process frequently discloses inaccurate, false, and/or incomplete or omitted information. Should this process determine any inaccurate or incomplete information, it will cause you to be either disqualified for employment with Bridges, Inc. as an applicant, or be grounds for termination if the inaccuracies are discovered subsequent to your employment. Accordingly, we strongly suggest that you NOT complete this application until you have the requisite time and accurate information to do so.

Bridges, Inc. is an equal opportunity employer and will not discriminate against any employee or applicant for employment in an unlawful manner. Employment is conditioned on the successful completion of the screening program. The information sought on this form is given voluntarily and may be used in filing reports required by state or federal governments.

POSITION(S) APPLIED FOR:	APPLICATION DATE:	
TYPE OF EMPLOYMENT DESIRED: FULL-TIME PART-TIME TEMPORARY	DATE YOU ARE AVAILABLE TO START WORK:	
APPLICANT NAME:	DATE:	
LIST OTHER NAMES YOU HAVE USED, INCLUDING MAIDEN NAMES, NICKNAMES, STAGE NAMES, MARRIED NAMES:		
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE NUMBER:	ALTERNATE PHONE NUMBER:	

HOW DID YOU LEARN ABOUT US?
ADVERTISEMENT EMPLOYMENT AGENCY FRIEND/RELATIVE WALK-IN INTERNET OTHER

ARE YOU ABLE TO MEET THE ATTENDANCE REQUIREMENTS? YES NO
DO YOU HAVE ANY OBLIGATIONS TO WORKING OVERTIME IF NECESSARY? YES NO
CAN YOU WORK EVENINGS AND WEEKENDS? YES NO
HAVE YOU EVER BEEN PREVIOUSLY EMPLOYED BY BRIDGES? YES NO
IF HIRED, CAN YOU SHOW PROOF THAT YOU MAY LEGALLY WORK IN THE USA? YES NO
MAY WE CONTACT YOUR PREVIOUS EMPLOYER(S)? YES NO
ARE YOU ABLE TO TRAVEL IF REQUIRED FOR YOUR JOB DUTIES? YES NO

HAVE YOU BEEN CONVICTED OF A CRIME OTHER THAN A MINOR TRAFFIC VIOLATION WITHIN THE LAST 7 YEARS?

YES NO (NOTE: A *CONVICTION WILL NOT NECESSARILY DISQUALIFY APPLICANT FROM EMPLOYMENT.)*

IF YES, PLEASE EXPLAIN:

EMERGENCY CONTACT

NAME:	RELATIONSHIP:	
PHONE NUMBER:	ALTERNATE PHONE NUMBER:	
ADDRESS:		
CITY:	STATE:	ZIP:

EMPLOYMENT HISTORY

PLEASE PROVIDE ALL EMPLOYMENT INFORMATION FOR THE PAST SEVEN YEARS STARTING WITH THE MOST RECENT. YOU MAY USE ANOTHER SHEET IF NECESSARY.

EMPLOYER:	POSITION HELD:	
ADDRESS:		
CITY:	STATE:	ZIP:
IMMEDIATE MANAGER AND TITLE:	PHONE NUMBER:	
EMPLOYMENT DATES: _____ TO _____		
JOB SUMMARY:		
REASON FOR LEAVING:		

EMPLOYER:	POSITION HELD:	
ADDRESS:		
CITY:	STATE:	ZIP:

IMMEDIATE MANAGER AND TITLE:	PHONE NUMBER:
EMPLOYMENT DATES: _____ TO _____	
JOB SUMMARY:	
REASON FOR LEAVING:	

EMPLOYER:		POSITION HELD:
ADDRESS:		
CITY:	STATE:	ZIP:
IMMEDIATE MANAGER AND TITLE:		PHONE NUMBER:
EMPLOYMENT DATES: _____ TO _____		
JOB SUMMARY:		
REASON FOR LEAVING:		

OTHER SKILLS AND QUALIFICATIONS

SUMMARIZE ANY JOB-RELATED TRAINING, SKILLS, LICENSES, CERTIFICATES AND/OR OTHER QUALIFICATIONS.

EDUCATIONAL HISTORY

LIST SCHOOL NAME AND LOCATION, NUMBER OF YEARS COMPLETED, COURSE OF STUDY AND ANY DEGREES EARNED

	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DIPLOMA/ DEGREE
HIGH SCHOOL				
UNDERGRADUATE COLLEGE				

GRADUATE PROFESSIONAL				
OTHER (SPECIFY)				

REFERENCES *LIST THREE PEOPLE WHO CAN COMMENT ON YOUR CHARACTER AND WORK HABITS. INCLUDE PHONE NUMBER AND YEARS KNOWN.* ***DO NOT INCLUDE RELATIVES AND/OR EMPLOYERS***.		
NAME:	PHONE NUMBER:	YEARS KNOWN:
NAME:	PHONE NUMBER:	YEARS KNOWN:
NAME:	PHONE NUMBER:	YEARS KNOWN:

COMMENT *PLEASE COMMENT ON WHY WE SHOULD CONSIDER YOU FOR EMPLOYMENT.*

I hereby authorize the Bridges, Inc. to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the Bridges, Inc., and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information. I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I, or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that Bridges, Inc., does not discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING; EITHER WITH OR WITHOUT REASONABLE ACCOMMODATIONS? YES NO

IF NO, PLEASE DESCRIBE THE FUNCTION YOU CANNOT PERFORM:

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I also understand that I will be required to provide proof of a current clear DMV report if I am required to drive as a component of my job with Bridges, Inc., Inc. I hereby authorize Bridges, Inc., Inc. to verify the validity of my driver's license at any time during my employment if I am required to drive in the course of my job with Bridges, Inc.

ARBITRATION

I agree that all claims by me arising during the application process, as well as during and following my employment with Bridges, Inc. including, but not limited to, unlawful discrimination and/or harassment, wrongful demotion, wrongful termination, invasion of privacy, or defamation will be presented to a neutral arbitrator for final and binding decision in accordance with the procedures adopted by Bridges, Inc. Binding arbitration will be used as well in the event of a claim filed with either the Equal Employment Opportunity Commission or the

California Department of Fair Housing and Employment once the agency has completed its determination.

I also agree that if any California Court with jurisdiction declares that any part of this arbitration agreement is illegal, invalid or unenforceable, such a declaration will not affect the legality, validity or enforceability of the remaining parts of the agreement, and that illegal, invalid or unenforceable part(s) will no longer be part of this agreement.

THIS AGREEMENT IS A WAIVER OF ALL RIGHTS TO CIVIL COURT ACTIONS FOR CLAIMS ARISING OUT OF THE APPLICATION PROCESS AS WELL AS EMPLOYMENT WITH BRIDGES, INC. SHOULD IT BE OFFERED, ONLY THE ARBITRATOR, NOT A JUDGE OR JURY WILL DECIDE THE OUTCOME OF ANY CLAIM OR DISPUTE.

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

Applicant Signature Date

Please Note: Bridges, Inc. maintains applications on active file only for a 30-day period of time. If you wish to be considered after a 30-day period, please re-apply.