CAL POLY Corporation

APPLICATION FOR EMPLOYMENT
STUDENTS & INTERMITTENTS

APPLICANT INFORMATION

Position/Department Applying For	Today's Date

Last Name, First, M.I.	Email	Cell Phone	Alternate Phone

Street Address, Apt #, City, State, Zip code

Are you 18 years or older? ☐ Yes ☐ No	Can you, if hired, submit verification of your legal right to work in the United States? ☐ Yes ☐ No

Have you previously worked for Cal Poly Corporation (CPC)? ☐ Yes ☐ No — If yes, please give dates & position(s)

Do you have any close family members working for CPC or Cal Poly State University (CPSU)? ☐ Yes ☐ No — Name of Relative & Relationship

Can you perform the essential functions of this position with or without accommodations? ☐ Yes ☐ No — If you require accommodation, what accommodations could CPC provide to enable you to perform the functions of this position?

Are you currently a member of the California Public Employees' Retirement System (CalPERS)? ☐ Yes ☐ No — If you are currently working for a CalPERS employer, list your employer's name and select your status whether full-time or part-time. ☐ Full-time ☐ Part-time

* If you are an active CalPERS member and are working less than full-time, CPC will pull CalPERS deductions each pay period

EMPLOYMENT RECORD

List below present and past employment, beginning with your most recent. (Add additional sheet if necessary) Please explain any gaps in employment.

Name of Company	Street Address, Apt #, City, State, Zip code	
From (Mo/Yr) To (Mo/Yr)	Last Position	Job Duties
Supervisor's Name/Title	Supervisor's Phone #	Reason for Leaving
Do you wish to be notified before we contact this employer? Yes ☐ No ☐		

Name of Company	Street Address, Apt #, City, State, Zip code	
From (Mo/Yr) To (Mo/Yr)	Last Position	Job Duties
Supervisor's Name/Title	Supervisor's Phone #	Reason for Leaving

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Have you ever been involuntarily discharged or asked to resign from employment? ☐ Yes ☐ No	If yes, please explain

List any other qualification, skills, etc.

EDUCATION

What is your highest level of education completed? ☐ High School ☐ Some College ☐ College Graduate ☐ Graduate School

	Name and Location of School	Field of Study	Did you Graduate?	Diploma or Degree
High School			☐ Yes ☐ No	
College/University			☐ Yes ☐ No	
Graduate School			☐ Yes ☐ No	
Business/Trade School			☐ Yes ☐ No	

AVAILABILITY

Notate what days/hours you are available to work.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM ☐ PM ☐	AM ☐ PM ☐	AM ☐ PM ☐	AM ☐ PM ☐	AM ☐ PM ☐	AM ☐ PM ☐	AM ☐ PM ☐

REFERENCES

Name	Occupation	Phone #	Email

EMERGENCY CONTACT

Name	Relationship	Phone #	Alternate Phone #

AUTHORIZATION AND UNDERSTANDING

By submitting this application, I certify that all statements made on this application and the information contained in all other documents I have submitted in support of my application are true and correct and that I have not knowingly withheld any factors or circumstances. I understand that my stated pre-employment qualifications are subject to verification and I hereby authorize Cal Poly Corporation (CPC) to confirm or investigate any information provided.

I understand that any falsification of my application material will be sufficient grounds for rejection of my application, or termination of employment. If selected for employment, I give CPC consent to conduct a criminal records check and may be required to be fingerprinted and/or undergo a medical examination. In submitting this application, I authorize CPC to contact each of my former employers, educational institutions and the reference(s) listed herein. I also authorize each of my former employers, educational institutions, and the reference(s) listed herein to give CPC any and all information concerning my education, previous employment, and any pertinent information they may have regarding my work performance, whether such information is favorable or unfavorable to me. I hereby fully release all such persons and entities from any liability with respect to furnishing such information to CPC and waive any claims I may have against them with respect to release of such information.

If employed, I agree to abide by all policies and procedures established by the CPC. I recognize that the relationship is at the mutual consent of CPC and me. Consequently, either CPC or I can terminate the employment at will, with or without cause or notice. I also understand and agree that the Company retains the right to demote, transfer, change my job duties, and adjust my compensation at any time with or without notice or without cause due to business necessity at its sole discretion. Employer and Employee further agree that this is at-will employment policy cannot be amended, modified or altered in any way by oral statements or in any other way, and can only be altered by written amendment signed by the Executive Director of CPC.

Signature _____ Date _____