

BenitoLink

APPLICATION FOR EMPLOYMENT

Thank you for your interest with BenitoLink. We are an equal opportunity employer and all applicants will be given equal consideration. BenitoLink does not discriminate against any applicant or employee because of race, color, age, sex, religion, disability, national origin, sexual orientation, marital status, veteran status, or any other legally protected status. Answers to application questions will be used for applicable, job-related reasons only. Incomplete applications will not be considered.

440 San Benito Street Hollister, CA 95023- Learn more at www.BenitoLink.com

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION (Please Print)

Last Name	First	Middle Initial	Today's Date
Street Address			Phone Number
City	State	ZIP Code	Alternative Phone Number
Other Name(s) Used			E-Mail Address
Referred By (please be specific)			Position(s) Applying for
Are you over the age of 18? ____ Yes ____ No If not, please provide your age: _____			
Are you eligible to work in the United States? ____ Yes ____ No [Proof of eligibility to work in the United States will be required before an individual can commence employment at BenitoLink].			

EMPLOYMENT HISTORY (please list all previous employment, beginning with present or most recent. If additional space is required, attach a separate document). In addition, please account for all gaps in employment.

Company	Address	Telephone
Position Title	Hours per week	Supervisor

Date (month/year) From: To:	Reason For Leaving	May we contact?
Duties and Responsibilities		Eligible for Rehire?
Gaps in Employment (if any)		

Company	Address	Telephone
Position Title	Hours per week	Supervisor
Date (month/year) From: To:	Reason For Leaving	May we contact?
Duties and Responsibilities		Eligible for Rehire?
Gaps in Employment (if any)		

Company	Address	Telephone
Position Title	Hours per week	Supervisor
Date (month/year) From: To:	Reason For Leaving	May we contact?
Duties and Responsibilities		Eligible for Rehire?
Gaps in Employment (if any)		

Company	Address	Telephone
Position Title	Hours per week	Supervisor

Date (month/year) From: To:	Reason For Leaving	May we contact?
Duties and Responsibilities		Eligible for Rehire?
Gaps in Employment (if any)		

EDUCATION

Education	Name & Address	Major	Degree/Certificate
High School			
Community College/Trade School			
College/University			
Graduate School			
List other completed classes, academic honors, additional skills or training which may be applicable to your employment at this Company:			

LANGUAGES

Language	Specify Skill Level P = Poor F = Fair G = Good E = Excellent			
___ English _____	___ Write	___ Read	___ Speak	___ Studied
___ Spanish _____	___ Write	___ Read	___ Speak	___ Studied
___ _____	___ Write	___ Read	___ Speak	___ Studied

CERTIFICATION

I certify that the information provided by me on this Application, accompanying resume, or any attachments that I have supplied, is true, correct and complete to the best of my knowledge and that any misrepresentation, omission, falsification or failure to disclose pertinent information will be cause for dismissal if hired.

I authorize, consent and hold harmless my current and prior employers, educational institutions and persons or organizations named in this Application (or accompanying Resume) to release any information to BenitoLink that may be required to make an employment decision. This authorization will serve as a release of any and all information and for this purpose; a photocopy shall be considered an original and valid.

I understand and agree that this Application is not a contract and that any acceptance of employment is not a contract of employment for a definite term. I understand that the Application will remain active for six (6) months. After that time, if I desire further consideration by BenitoLink, I will renew my Application in writing or in person.

Applicant's Full Signature: _____ Date: _____

Affirmative Action Employment Questionnaire

Applicant: Please complete this form and submit it with your application. The form will be detached from your application and will be kept separate and confidential. This information is being gathered for the purpose of evaluating the effectiveness of Affirmative Action procedures, which this Agency uses to recruit applicants and measure their qualifications. The information will not be used in any way to make any employment decision that affects you. This information is an integral part of the Agency's Affirmative Action Program and is necessary to ensure equal opportunities for all. In addition, the collection of ethnic data to ensure equality is required by law.

Position applied for: _____

Date: _____

I first learned of this job opening through (check one):

- _____ **A friend or relative**
- _____ **An organization or group (please specify)** _____
- _____ **A job online posting, which website?** _____
- _____ **A newspaper article, which paper?** _____
- _____ **Other means (please specify)** _____

PERSONAL DATA FOR AFFIRMATIVE ACTION PURPOSES ONLY

Age (check one): ___ under 20 ___ 20-30 ___ 31-39 ___ 40-59 ___ 60 or older **Sex**

(check one): ___ Female ___ Male ___ Other

Ethnic Data:

- ___ Black- African-American
- ___ Hispanic (includes all persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race, other than Europeans)
- ___ American Indian/Native American/Alaskan Natives
- ___ White (not of Hispanic origin)
- ___ Two or more races, not Hispanic or Latino

- ___ Asian, not Hispanic or Latino
- ___ Native Hawaiian or Other Pacific Islander, not Hispanic or Latino
- ___ Other

Veteran Status

___ Disabled Veteran ___ Vietnam Era Veteran