



EMPLOYMENT APPLICATION

Please complete the entire application.

EMPLOYER INFORMATION

EMPLOYER: Joshua Tree Residential Education Experience (JTREE)
 ADDRESS: PO Box 980 CITY, ST & ZIP: Joshua Tree, CA 92252
 PHONE: (714) 270-7098

It is the policy of Joshua Tree Residential Education Experience to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

APPLICANT INFORMATION

APPLICANT FULL NAME: _____
 HOME ADDRESS: _____ CITY, ST & ZIP: _____
 NUMBER OF YEARS AT THIS ADDRESS: _____
 DAYTIME PHONE: _____ EVENING PHONE: _____
 SOCIAL SECURITY NUMBER: _____ *(this can be provided at the time a background check is performed)*
 DRIVER'S LICENSE (STATE/NUMBER): _____

EMERGENCY CONTACT

CONTACT FULL NAME: _____ RELATIONSHIP TO YOU: _____
 ADDRESS: _____ CITY, ST & ZIP: _____
 DAYTIME PHONE: _____ EVENING PHONE: _____

OTHER

JOB POSITION APPLIED FOR: _____
 FULL-TIME/PART-TIME/SEASONAL? _____ SALARY DESIRED: _____
 WHO REFERRED YOU TO US, OR WHERE DID YOU SEE JOB POST? _____
 ARE YOU AT LEAST 18 YEARS OLD? _____ Yes _____ No
 HOW WILL YOU GET TO WORK? _____
 ARE YOU WILLING TO WORK ANY SHIFT, INCLUDING NUMGHTS AND WEEKENDS? _____ Yes _____ No
 IF NO, PLEASE STATE ANY LIMITATIONS: _____

IF YOU ARE OFFERED EMPLOYMENT, WHEN WOULD YOU BE ABLE TO BEGIN? _____

IF HIRED, ARE YOU ABLE TO SUBMIT PROOF THAT YOU ARE LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? _____ Yes _____ No

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB POSITION YOU SEEK WITH OR WITHOUT REASONABLE ACCOMMODATION? _____ Yes _____ No

WHAT REASONABLE ACCOMMODATION, IF ANY WOULD YOU REQUEST? _____

APPLICANT’S SKILLS

List any skills that may be useful for the job you are seeking. Enter the number of years of experience and circle the number which corresponds to your ability for each particular skill. (1 represents poor ability, 5 represents exceptional ability.)

SKILL	YEARS OF EXPERIENCE	ABILITY RATING
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5

APPLICANT’S EMPLOYMENT HISTORY

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent. List and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

EMPLOYER NAME: _____ SUPERVISOR NAME: _____

ADDRESS: _____ CITY, ST & ZIP: _____

JOB DUTIES: _____

REASON FOR LEAVING: _____

DATES OF EMPLOYMENT (MONTH/YEAR): _____

EMPLOYER NAME: _____ SUPERVISOR NAME: _____

ADDRESS: _____ CITY, ST & ZIP: _____

JOB DUTIES: _____

REASON FOR LEAVING: _____

DATES OF EMPLOYMENT (MONTH/YEAR): _____

EMPLOYER NAME: _____ SUPERVISOR NAME: _____

ADDRESS: _____ CITY, ST & ZIP: _____

JOB DUTIES: _____

REASON FOR LEAVING: _____

DATES OF EMPLOYMENT (MONTH/YEAR): _____

APPLICANT'S EDUCATION & TRAINING

COLLEGE/UNIVERSITY NAME & ADDRESS: _____

DID YOU RECEIVE A DEGREE? _____ Yes _____ No IF YES, DATE RECEIVED: _____

HIGH SCHOOL/GED NAME & ADDRESS: _____

DID YOU RECEIVE A DEGREE? _____ Yes _____ No

OTHER TRAINING (GRADUATE, TECHNICAL, VOCATIONAL):

PLEASE INDICATE ANY CURRENT PROFESSIONAL LICENSES OR CERTIFICATES THAT YOU HOLD:

HONORS, AWARDS, SPECIAL ACHIEVEMENTS:

MILITARY SERVICE? _____ Yes _____ No

BRANCH: _____ SPECIALIZED TRAINING: _____

PROFESSIONAL REFERENCES

1-FULL NAME: _____ RELATIONSHIP TO YOU: _____

ADDRESS: _____ CITY, ST & ZIP: _____

PHONE: _____ EMAIL: _____

2-FULL NAME: _____ RELATIONSHIP TO YOU: _____

ADDRESS: _____ CITY, ST & ZIP: _____

PHONE: _____ EMAIL: _____

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Joshua Tree Residential Education Experience to contact former employers and educational organization regarding my employment and education. I authorize my former employers and educational organizations to communicate information fully and freely regarding my previous employment, attendance and grades. I authorize those persons designated as references to communicate information fully and freely regarding my previous employment and education.

If any employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Chairman of the Board, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Joshua Tree Residential Education Experience, except in a specific written contract of employment signed on behalf of the organization by its Chairman of the Board, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE

DATE