



**EMPLOYMENT APPLICATION**

It is the policy of Dhaliwal Labs 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.

PLEASE NOTE: It is important that you complete all parts of the application. If your application is incomplete or does not clearly show the experience and/or training required, your application may not be accepted. If you have no information to enter in a section, please write N/A.

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**Name and Address**

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Name (First, MI, Last)

Social Security Number

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Mailing Address

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City, State, and Zip Code

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Telephone

Alternate Phone

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If under 18, please list age

Email

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**Job Type**  
**Days/hours available to work**

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I have no preference      Mon.      Tues.      Wed.      Thurs.      Fri.

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I am seeking a:    Full-time job      Part-time Job      Full or Part time

How many hours can you work weekly? \_\_\_\_\_ Can you work nights? \_\_\_\_\_  
Can you work weekends? \_\_\_\_\_



Date available to begin \_\_\_\_\_

Job/Position Applied for:<sup>i</sup> \_\_\_\_\_

Salary Desired: \$ \_\_\_\_\_ per \_\_\_\_\_

### Additional Information

Have you ever been employed by this company in the past?      Yes      No  
If so, when \_\_\_\_\_

Who referred you to our Company? \_\_\_\_\_

Do you have friends or relatives who work here? If yes, please list here:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of, or entered a plea of guilty, no contest, or had a withheld judgement to a felony in the past 7 years?<sup>ii</sup>      Yes      No  
If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Emergency Contact

Who should be contacted if you are involved in an emergency?

Contact Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_



### **Applicant 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. If additional space is needed, continue on the back page of this application.

Employer Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Job Duties: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Dates of Employment (Month/Year): \_\_\_\_\_

Employer Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Job Duties: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Dates of Employment (Month/Year): \_\_\_\_\_

Employer Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Job Duties: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Dates of Employment (Month/Year): \_\_\_\_\_



### **Applicant's Education and Training**

College/University Name and Address

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Did you receive a degree? \_\_\_ Yes \_\_\_ No If yes, degree(s) received: \_\_\_\_\_

High School/GED Name and Address \_\_\_\_\_

Did you receive a diploma? \_\_\_ Yes \_\_\_ No

Other Training (graduate, technical, vocational):

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Please indicate any current professional licenses or certification that you hold:

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Awards, Honors, Special Achievements:

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Military Service: \_\_\_\_\_ Yes \_\_\_\_\_ No

Branch: \_\_\_\_\_

Specialized Training: \_\_\_\_\_

### References

List any two non-relatives or friends who would be willing to provide a reference for you.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_

Relationship: \_\_\_\_\_



**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 Dhaliwal Labs to contact former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an 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 Owner, 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 Dhaliwal Labs except in a specific written contract of employment signed on behalf of the organization by its Owner, 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

\_\_\_\_\_  
<sup>i</sup> Are you able to perform the essential functions of the job you seek with or without reasonable accommodation?  
Yes \_\_\_\_ No \_\_\_\_

<sup>ii</sup> The existence of a criminal record does not constitute an automatic bar to employment unless relevant to the type of employment.