

EMPLOYMENT APPLICATION

An Equal Opportunity Employer Hiring is based on the doctrine of "at-will-employment"

This is Clairemont Equipment's Official Employment Application Resumes will not be accepted in lieu of this Completed Employment Application

All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, pregnancy, age, national origin, ancestry, physical/mental disability, medical condition, military/veteran status, genetic information, marital status, ethnicity, citizenship or immigration status, or any other protected classification, in accordance with applicable federal, state, and local laws. By completing this application, you are seeking to join a team of hardworking professionals dedicated to consistently delivering outstanding service to our customers and contributing to the financial success of the organization, its clients, and its employees. Equal access to programs, services, and employment is available to all qualified persons. Those applicants requiring an accommodation to complete the application and/or interview process should contact a management representative.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE COMPANY IS AUTHORIZED TO ENTER INTO AN AGREEMENT – EXPRESS OR IMPLIED – WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY. IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME. EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

PLEASE PRINT OR TYPE

First Name		Last Name			Mie	Middle Name		
Street Address		Ci	ty	State	2	Zip Code		
Cell Phone Number Al		Alt. Phone Num	Alt. Phone Number		Email			
EMPLOYMENT I	NFORMATION							
Position Applied For			Da	te of Applicatio	n			
Applied for Position at Wh	ich Branch:							
Corporate Offic	ce Bakersfield	Escondido	Fontana	Imperia	al Indio	San Diego		
	work schedule you are apply	ying for:		· · ·				
Regular Full-T	ïme Work Reg	ular Part-Time Work	Temp	orary Work (ie: Si	ummer or Holiday	Work)		
What days and hours are you available for work?								
Would you be available to work overtime if necessary? Yes No								
Date on which you can start work if hired:								
If hired, can you present evidence of your identity and legal right to work in the United States? Yes No				No				
lf Yes,								
Have you ever been employed with us before? If Yes, When & Which location?								
Do any of your friends or relatives work for Clairemont Equipment? If Yes, List Name & Relationship:								
For Administrative / Clerical Positions: Typing SpeedWPM (net), 10 key by touch?YesNo					No			
For Mechanical Positions: Do you have a full set of tools? Yes No Approximate Value:								
Salary Desired:			nments:					

PLEASE FORWARD TO THE HUMAN RESOURCE DEPARTMENT

Email: HR@ClairemontEquipment.com | Drop Off In Person at A Branch | Mail: 7651 Ronson Road | San Diego, CA 92111

		PE	ERSONAL INF	ORMATION			
1. Are you at	least 18 ye	ars old? Yes N	No				
2. If hired, do	you have a	a reliable means of trans	sportation to and f	rom work? Yes	No		
3. Any other r	names or n	icknames needed to ch	eck your work rec	ord or complete a bac	kground check?	Yes No	
lf so, what							
4. Are you wil	ling to unde	ergo a background cheo	ck, in accordance	with local law/regulation	ons? Yes	No	
5. Are you ab	le to perfor	m the essential job fund	ctions of the job fo	r which you are applyi	ng for? Yes	No	
		Americans with Disabilities A		nable accommodation mea	sures that may be neces	sary for qualified	
		erform essential job functions					
		for work at our compar					
7. Do you speak, write or understand any foreign language?							
8. Check box		•	Late:	NEVER	SELDOM	OFTEN	
Attendanc	e record a	t previous Jobs:	Absent: NEVER		SELDOM	OFTEN	
		F	DUCATION &	TRAINING			
	Schoo	I Name & Location	Diploma/Degree		Specialized Tr	aining, Skills or	
Education	(Ac	ldress, City, State)	(Yes/No)	Area of Study/Major	extracurric	ular activities	
High School							
College							
Graduate / Professional							
Trade School /	ļ						
Other							
Military							
-		ce, training, skills, or other q		ou feel make you especial	ly suited for work at Cla	airemont Equipment	
please attach a cor	nment sheet	or let your interviewer kno					
]	DRIVING INFO	RMATION			
If DRIVING is a fu	unction of the	Job you are applying for?	Yes No	D If YES , Attach	your DMV Printout I	f NO, Skip this section.	
Do you have a	a valid drive	ers license? Yes	No State of Issu	ance Cla	ass Expires		
Have you eve	r had a Dri	vers License or any Mo	tor Vehicle Licens	e Denied, Suspended	or Revoked in the la	ast 7 years?	
Yes	No If Ye	s, explain:					
				If No. ovalain			
• •		utomobile insurance? ied personal automobile		If No, explain:	ed or suspended?	Yes No	
Trave you eve		•			•	res no	
				in the last five (5) yea			
Offense		Date		Comments			
DO YOU HAVE	A DOT CO	MMERCIAL DRIVERS LI	CENSE? Ye	es No If	No, Skip Below DC	OT section.	
		COMPLETE IF YOU ARE APPLY		ITION WHICH IS COVERED BY	A FEDERAL DOT REGULATI	UNS	
Are you curre	nuy illegally			erator s license or permit is	sued to you		
		List all oustanding non park					
						oment Operated	
Documen	nt Type	Document Number	Issuing State	Expires	& Details of	Experience.	
		Describe all acciden	ts that you were ir	nvolved in during the la	ast 3 years.		
Dat	e	List Injuries	and/or Fatalities	Descri	be the nature of ea	ach Accident	
		1					
		<u> </u>					

EMPLOYMENT HISTORY

List below, present and past employment in order, <u>Sta</u> give company name		n your most recent employer fir bly business references. Add an a			ds of time. If se	elf-employed,	
Must Complete this section in order to be	consider	ed for Employment. Resume v	vill <u>NOT</u> be accep	oted in place	e of this sect	ion.	
Name of Employer	Name of Employer Em			s Employe	d (month/ye	ear)	
Employment Address: City & State	9	Supervisor'	s Name/Title		May We Contact?		
					Yes	No	
Job Title and Duties		Reason for Lea	aving	How Much Notice Did you Give?			
Explain if you were ever Disciplined:							
Name of Employer	Em	ployer's Phone Number	Date	s Employe	d (month/ye	ear)	
Employment Address: City & State	9	Supervisor'	s Name/Title		May We	Contact?	
					Yes	No	
Job Title and Duties		Reason for Lea	aving	How Muc	h Notice Did	you Give?	
Explain if you were ever Disciplined:							
Name of Employer	Em	ployer's Phone Number	Date	s Employe	d (month/ye	ear)	
Employment Address: City & State	Supervisor's Name/Title			May We	Contact?		
					Yes	No	
Job Title and Duties		Reason for Lea	aving	How Muc	h Notice Did	you Give?	
Explain if you were ever Disciplined:							
Name of Employer	Em	ployer's Phone Number	Date	s Employe	d (month/ye	ear)	
Employment Address: City & State	9	Supervisor'	s Name/Title		May We	Contact?	
					Yes	No	
Job Title and Duties		Reason for Lea	aving	How Muc	h Notice Did	vou Give?	
Explain if you were ever Disciplined:							
Explain any gaps in your employment history.							
Have you ever been terminated or aske	d to res	sign from any job?	Yes N	0			
If yes, please explain:							
		REFERENCES					
List three references of individuals who are Name	not relat	ed to you. Relationship	Telephone	Number	# of Years	Known_	
Name		Relationship	relephone	Number		KIIGWII	

APPLICANT STATEMENT, AGREEMENT, RELEASE & AUTHORIZATION
Read and initial each paragraph below. Ask for clarification prior to initially if there is anything that you do not understand.
I Hereby authorize the company and its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking to the extent permitted by federal, state, or local law. In connection with my application for employment with Clairemont Equipment (hereafter COMPANY), I understand an investigative background check may be requested and obtained or performed by COMPANY to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to the company any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers, and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.
In the event of my employment with the company, I understand that I am required to comply with all rules and regulations of the company.
I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for California, automobile liability insurance in an amount equal to the minimum required by the state of California and comply with the qualification of COMPANY Fleet Vehicle Use Agreement and Policy.
I acknowledge that the company has established a drug-free workplace, including a drug and alcohol testing program in compliance with federal, state, and local laws. If I receive a conditional offer of employment, I understand that passing a pre- employment drug test and physical examination will be required. I agree to adhere to the conditions of a drug-free workplace, as mandated by applicable laws. Additionally, I understand that all employees, in accordance with the company's policy and relevant laws, may be subject to urinalysis, blood screening, or other medically recognized tests to detect the presence of alcohol, marijuana, illegal, or controlled substances during employment. I accept that undergoing alcohol and drug testing is a condition of continued employment and agree to comply with the company's policies and applicable laws.
If employed by the company, I understand and agree that the company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, phones and computers) and, in certain circumstances, my personal property.
If hired, I understand and agree that my employment with the company is at will and that neither I nor the company is required to continue the employment relationship for any specific term. I further understand that the company or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.
I understand that the safety of employees is extremely important to the company and that the company is committed to ensuring a safe working environment. I understand that I, and every employee, have a responsibility to prevent accidents and injuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with federal, state, and local regulations related to on-the-job safety and health.
I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
I understand that if I am selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration law requires me to complete an I-9 Form in this regard.
I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I will be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement. I certify that I am NOT under 18 years of age and that all the information on this application, my resume, or any supporting documents I may present during any interview is and will be true, complete and accurate to the beset of my knowledge. I understand that any falsification, misrepresentation, omission of any information may result in disqualification from consideration for employment, or if employed, disciplinary action, up to and including immediate dismissal.
I understand that if any term, provision, or portion of this Agreement is declared void or unenforceable, it shall be severed, and the remainder of this Agreement shall be enforceable.
This application will be considered active for a maximum of sixty (60) days. If you wish to be considered for employment after that time, you must reapply. I acknowledge that a digitally signed, faxed or Photographic Copy of this signed statement will be as valid as one signed in ink. DO NOT SIGN UNTIL YOU HAVE READ ALL OF THE INFORMATION CONTAINED IN THE APPLICATION. My signature attests to the fact that I have read, understand, and agree to all of the above terms.
Signature: Date:

Print	Name:
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