

APPLICATION FOR EMPLOYMENT

(NON-DRIVING POSITION)

LEE JENNIGS TARGET EXPRESS, INC

1465 E. Franklin Ave. Pomona, CA 91766

Phone 909-868-1040, Fax 909-865-1405

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, sexual orientation, national origin, age, marital status, or disability.

(PLEASE ANSWER ALL QUESTIONS – PLEASE PRINT)

Date of Application _____

Position(s) Applied for _____

Name _____ Social Security No. _____
Last First Middle Initial

List your addresses of residency for the past 3 years.

Current Address _____
Street City

State Zip Code Phone _____ How long? _____

Previous Addresses _____
Street City State & Zip Code How long? _____

Street City State & Zip Code How long? _____

Do you have the legal right to work in the United States? _____

Have you worked for Lee Jennings Target Express, Inc before? _____ Where? _____

Dates: From _____ To _____ Rate of Pay _____ Position _____

Reason for leaving employment with Lee Jennings Target Express, Inc _____

Are you now employed? _____ If not, how long since you left your last employment? _____

Who if anyone referred you? _____ Rate of pay expected _____

Have you served in the Military? _____ When? _____ Branch? _____

Is there any reason you might be unable to perform the functions of the job for which you have applied?

☐ Yes ☐ No ☐ Accommodations may be required under the Americans with Disabilities Act

If yes, explain if you wish _____

Have you ever been convicted of a felony or misdemeanor that may affect your ability to drive a commercial motor vehicle?

☐ Yes ☐ No

If yes, explain if you wish _____

Continue to next page – EXPERIENCE AND QUALIFICATIONS

EXPERIENCE AND QUALIFICATIONS

Education History

	DID YOU GRADUATE?	DATES ATTENDED		NAME AND LOCATION OF SCHOOL
		(TO)	(FROM)	
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE SCHOOL				
OTHER				

Licenses and Certificates

	SUBJECT	LICENSE / CERT NO.	DATE COMPLETED	NAME AND LOCATION OF SCHOOL
LIST ALL CERTIFICATES / LICENSES YOU MAINTAIN				

Computer Skills

	PROGRAM NAME	DATES USED IN WORK /SCHOOL		PROFICIENCY LEVEL
		(FROM)	(TO)	
LIST COMPUTER PROGRAMSTHAT YOU ARE PROFICIENT IN				

List courses of study, training or skills that may help you in the position applied for_____

List any awards you have received_____

Continue to next page – EMPLOYMENT HISTORY

EMPLOYMENT HISTORY

All applicants must provide the following information for all employers during the preceding 3 years. Please attach additional pages if necessary.
List employers in reverse order, starting with the most recent.

EMPLOYER			DATES	
NAME			From	To
			MM	YY
ADDRESS			Position Held	
CITY			Salary/Wage	
STATE				
ZIP				
CONTACT			Reason for Leaving	
PHONE				
FAX				

EMPLOYER			DATES	
NAME			From	To
			MM	YY
ADDRESS			Position Held	
CITY			Salary/Wage	
STATE				
ZIP				
CONTACT			Reason for Leaving	
PHONE				
FAX				

EMPLOYER			DATES	
NAME			From	To
			MM	YY
ADDRESS			Position Held	
CITY			Salary/Wage	
STATE				
ZIP				
CONTACT			Reason for Leaving	
PHONE				
FAX				

EMPLOYER			DATES	
NAME			From	To
			MM	YY
ADDRESS			Position Held	
CITY			Salary/Wage	
STATE				
ZIP				
CONTACT			Reason for Leaving	
PHONE				
FAX				

EMPLOYER			DATES	
NAME			From	To
			MM	YY
ADDRESS			Position Held	
CITY			Salary/Wage	
STATE				
ZIP				
CONTACT			Reason for Leaving	
PHONE				
FAX				

EMPLOYER			DATES	
NAME			From	To
			MM	YY
ADDRESS			Position Held	
CITY			Salary/Wage	
STATE				
ZIP				
CONTACT			Reason for Leaving	
PHONE				
FAX				

Continue to next page - ARBITRATION AGREEMENT

ARBITRATION AGREEMENT

Agreement:

I agree that any claim, dispute, or controversy (including, but not limited to, any and all claims of discrimination and harassment) which would otherwise require or allow resort to any court or other dispute resolution forum between myself and the company (or its owners, directors, officers, managers, employees, agents, and parties affiliated with its employee benefits and health plans) arising from, related to, or having any relationship or connection whatsoever with my seeking employment with, employment by, or other association with the company, whether based on tort, contract, statutory, or equitable law, or otherwise, (with the sole exception of claims arising under the National Labor Relations Act which are brought before the National Labor Relations Board, claims for medical and disability benefits under the California Workers' Compensation Act, and Employment Development department claims), shall be submitted to and determined exclusively by binding arbitration under the Federal Arbitration Act., in conformity with the procedures of the California Arbitration Act (Cal. Code Civ. Proc. Sec 1280 et seq., including section 1283.05 and all of the act's other mandatory and permissive rights to discovery); provided however, that: In addition to the requirements imposed by law any arbitrator herein shall be a retired California Supreme Court Judge and shall be subject to disqualification on the same grounds as would apply to a judge of such court.

To the extent possible in civil actions in California courts, the following shall apply and be observed: all rules of evidence, all rights to resolution of the dispute by means of motions for

summary judgment, judgment on the pleadings, and judgment under Code of Civil Procedure Section 631.8. Resolution of the dispute shall be based solely upon the law governing the claims and defenses pleaded, and the arbitrator may not invoke any basis (including but not limited to, notions of "just cause") other than such controlling law. The arbitrator shall have the immunity of a judicial officer from civil liability when acting in the capacity of an arbitrator, which immunity supplements any other existing immunity. Likewise, all communications during or in connection with the arbitration proceedings and are privileged in accordance with Cal. Civil Code Section 47(b). As reasonably required to allow full use and benefit of this agreement's modifications to the act's procedures and the arbitrator shall extend the times set by the act for the giving of notices and setting of hearings. Awards shall include the arbitrator's written reasoned opinion and, at either party's request within 10 days after issuance of the award, shall be subject to reversal, remand or modification following review of the record and arguments of the parties by a second arbitrator who shall as far as practicable, proceed according to the law and procedures applicable to appellate review by the California Court of Appeal of a civil judgment following court trial.

Should any portion, word, clause, phrase, sentence or paragraph of this Agreement be declared void or unenforceable, such portion shall be considered independent and severable from the remainder, the validity shall remain unaffected.

Statement:

I UNDERSTAND BY AGREEING TO THIS BINDING ARBITRATION PROVISION, BOTH I AND THE COMPANY GIVE UP OUR RIGHTS TO TRIAL BY JURY.

(If you have any questions regarding the above Arbitration Agreement or Statement, please discuss it with a legal representative before signing.)

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND AND AGREE TO THE ABOVE ARIBTRATION AGREEMENT AND STATEMENT.

Signature of Applicant_____

Date_____

Printed Name of Applicant_____

Continue to next page - DRUG AND ALCOHOL TESTING / EXAMINATIONS

DRUG AND ALCOHOL TESTING / EXAMINATIONS

- In the event of my employment to a position in this Company, I will comply with all rules and regulations of this Company.
- I understand that the Company reserves the right to require me to submit to a test for the presence of drugs in my system prior to employment. And at any time during my employment may require me to submit for tests for drugs and/or alcohol, to the extent permitted by law.
- I also understand that any offer of employment may be contingent upon the passing of a physical examination.
- I consent to the disclosure of the results of any physical examination and related tests to the Company.
- I also understand that I may be required to take other tests such as personality and honesty tests, prior to employment and during employment.
- I understand that should I decline to sign this consent or decline to take any of the above tests, my application for employment may be rejected or my employment may be terminated.
- I understand that bonding may be a condition of hire. If it is, I will be so informed and a bond application will have to be completed.

(If you have any questions regarding the above points or statements, please discuss them with a legal representative before signing.)

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE POINTS AND STATEMENTS AND BY SIGNING BELOW, AGREE TO EACH POINT AND STATEMENT.

Signature of Applicant_____

Date_____

Printed Name of Applicant _____

Continue to next page - BACKGROUND INVESTIGATIONS

BACKGROUND INVESTIGATIONS

- I understand that the Company may investigate my driving record and my criminal record and that an investigative consumer report may be prepared whereby information is obtained through personal interviews with my neighbors, friends, personal references, and others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living.
- I authorize the Company to obtain a consumer credit report on me. I also acknowledge and certify that I have been given prior written notification that a consumer credit report may be obtained and that I have been given a copy of said written notification.
- I understand that I have the right to make a written inquiry, within a reasonable period of time, to receive additional detailed information about the nature and scope of this investigation.
- I hereby state that all information that I provided on this application or any other documents filled out in connection with my employment, and in any interview, is true and correct. I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that if I am employed and any such information is later found to be false or incomplete in any respect, I may be dismissed.
- I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records and information pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees and representatives, as well as other individuals who release information to the Company, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me. I authorize the persons named herein as personal references to provide the Company with any pertinent information they may have regarding myself.

(If you have any questions regarding the above points or statement, please discuss them with a legal representative before signing.)

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE POINTS AND STATEMENTS AND BY SIGNING BELOW, AGREE TO EACH POINT AND STATEMENT. THIS ALSO CERTIFIES THAT THIS APPLICATION WAS COMPLETED BY ME, AND THAT ALL ENTRIES ON IT AND INFORMATION IN IT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Signature of Applicant_____

Date_____

Printed Name of Applicant _____

You have completed the application. The next page is for office use.

	SUPERIOR	GOOD	FAIR	BELOW AVERAGE	POOR
1. APPLICATION	☐	☐	☐	☐	☐
2. INTERVIEW	☐	☐	☐	☐	☐
3. PAST EMPLOYMENT	☐	☐	☐	☐	☐
4. ROAD TEST	☐	☐	☐	☐	☐
5. CRIMINAL CONVICTIONS	☐	☐	☐	☐	☐
6. TRAFFIC CONVICTIONS	☐	☐	☐	☐	☐

Hire Date _____ Rejected Date _____ Term Date _____

Is Employee Eligible for Rehire? _____, If NO, Explain _____

Application Reviewed By _____

Applicant Interviewed By _____

Applicant Rejected By _____

Applicant Hired By _____

Employment Termination: Dismissed Voluntary Quit Other

Supervisor at Termination _____