



A-1 IRRIGATION

28511 Cole Grade Rd. Valley Center, CA 92082 (760) 749-1213

Position Applied For: _____ Date of Application: _____

PERSONAL INFORMATION			
Last Name	First Name	Middle Initial	Phone Number
Present Street Address		City	State Zip
Name & phone number of person to be notified in case of emergency			
Are you able to perform the essential functions of the position for which you are applying, either with or without reasonable accommodations?			Yes No
Do you have the legal right to work and be employed in the U.S.? <small>(Proof of identity and legal authority to work in the U.S. is a condition of employment.)</small>			Yes No
Are you at least age 18? <small>(Proof of age and work permits may be required prior to hiring.)</small>			Yes No
Do you have a reliable means of transportation to and from work?			Yes No

EDUCATION					
	Name of School and Address	Graduated (Yes/No)	Number of Years	Course or Major	G.P.A.
Junior High					
High School					
College					
Other					
Extracurricular Activities (You may omit those which indicate your race, color, religion, sex, national origin, ancestry, age or existence of any disability.)					

A-1 Irrigation, Inc. is an equal opportunity employer. A-1 Irrigation, Inc. does not discriminate on the basis of race, color, religious creed, national origin, ancestry, disability, medical condition, marital status, sex, age or sexual orientation or any other factor prohibited by local, state or federal law.

GENERAL INFORMATION

Date available to start:

Full-time or Part-time?

Days and Hours: Sunday Monday Tuesday Wednesday Thursday Friday Saturday

Available to Work From: _____

To: _____

Can you work weekends?

Yes

No

Can you work overtime?

Yes

No

EMPLOYMENT/WORK EXPERIENCE

Please list all your jobs during the past five years. (If applicable, you may list work performed on a voluntary basis. If you need additional pages, please attach.)

Company No. 1 (present or most recent employer): _____

Address: _____

Telephone Number: (____) _____ - _____

Dates Employed (Month and Year): _____ to _____

Position(s) Held:

Supervisor's Name and Position:

Describe all of your significant job duties:

May we contact this employer? **Yes** **No**

Reason for leaving:

Company No. 2 (second most recent employer): _____

Address: _____

Telephone Number: (____) _____ - _____

Dates Employed (Month and Year): _____ to _____

Position(s) Held:

Supervisor's Name and Position:

Describe all of your significant job duties:

May we contact this employer? **Yes** **No**

Reason for leaving:

EMPLOYMENT/WORK EXPERIENCE (Continued)

Company No. 3 (third most recent employer): _____

Address: _____

Telephone Number: (____) ____ - _____

Dates Employed (Month and Year): _____ to _____

Position(s) Held:

Supervisor's Name and Position:

Describe all of your significant job duties:

May we contact this employer? **Yes** **No**

Reason for leaving:

RECOMENDATIONS

Name:

Years Known:

Company:

Contact Number:

Name:

Years Known:

Company:

Contact Number:

CERTIFICATIONS AND AUTHORIZATIONS:

By signing this application, you agree and certify:

A. INFORMATION PROVIDED:

I hereby certify that the information contained in this application and any other application materials, including my resume, is true and correct to the best of my knowledge and I agree that A-1 Irrigation, Inc. (the "Company") may check any of the statements unless I have indicated so to the contrary.

I authorize the references listed above, as well as all other individuals whom the Company contacts, to provide the Company with any and all information concerning my previous employment and any other pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the Company as well as from any use or disclosure of such information by the Company or any of its agents, employees, or representatives.

I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, my immediate dismissal from employment.

B. REFERENCES:

I also understand that all offers of employment are conditioned on the Company's receipt of satisfactory responses to reference requests and the provision of satisfactory proof of an applicant's identity and legal authority to work in the United States.

C. RULES AND STANDARDS OF COMPANY:

If employed, in consideration of my employment, I agree to conform to the rules and standards of the Company.

I further agree to wear or use all protective clothing or equipment required by the Company and to comply with all safety policies and procedures required by the Company. I acknowledge this includes (a) reporting all injuries, regardless of their severity, directly to a proper representative of the Company, and (b) using proper lifting techniques, and immediately reporting all safety hazards to the Company after discovery.

D. AT-WILL EMPLOYMENT:

I further agree that if I am hired, my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, either at my option or at the option of the Company.

I understand that no employee or representative of the Company, other than its president, has the authority to enter into any agreement for employment for any specified period of time, or to make any express or implied agreement contrary to the foregoing. Further, the president of the Company may not alter the at-will nature of the employment relationship or enter into any employment agreement for a specified time unless the president and I both sign a written agreement that clearly and expressly specifies the intent to do so.

I agree this application shall constitute a final and fully binding integrated agreement with respect to the at-will nature of my employment relationship and that there are no oral, written or collateral agreements regarding this issue.

I have read, understand, and agree to the above statements.

Signature of Applicant

Date

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