

Employment History and Skill Expertise

Is this your first job? (If "NO", list employment history below starting with current or most recent employer) YES NO

Company Name: _____ Are you still with this employer? YES NO
 Company Address: _____ If "NO", provide reason: _____
 Job Title or Position Held: _____ May we contact this employer? YES NO
 Supervisor's Name: _____ Start Date: _____ End Date: _____
 Phone Number: _____ Salary or Hourly Rate: _____

Company Name: _____ Are you still with this employer? YES NO
 Company Address: _____ If "NO", provide reason: _____
 Job Title or Position Held: _____ May we contact this employer? YES NO
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 Supervisor's Name: _____ Start Date: _____ End Date: _____
 Phone Number: _____ Salary or Hourly Rate: _____

References

Please provide the names and contact information of three people not related to you, and whom you have know at least 1 year:

	<u>Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Years Known</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

How did you hear about employment with Camelback? TV NEWSPAPER INTERNET RADIO RELATIVE
 OTHER, please list: _____

Equal Opportunity Employment and Applicant Certification

We consider applicants for all positions regardless of race, color, religion, gender, national origin, age, marital or veteran's status, disability, medical condition or handicap, or any other legally protected status.

I certify the information contained in this application are true and complete to best of my knowledge and understand that if employed, falsified statements on this application or intentionally omitted, shall be grounds for termination. I authorize investigation of all my statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from liability for any damage that may result from furnishing the same to you.

I understand and agree that if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice.

Signature: _____ Date: _____