LARS ANDERSEN & ASSOCIATES, INC. ("the Company") APPLICATION FOR EMPLOYMENT

Lars Anderson & Associates, Inc. is an equal opportunity employer and affords equal employment opportunities to all applicants and employees without regard to race, color, creed, national origin, ancestry, sex, sexual orientation (including gender identity, age, religion, physical disability (including HIV or AIDS), mental disability, medical condition, marital status (including registered domestic partner status), citizenship status, military service status or other consideration protected by law.

ate <u>:</u>	Social Security No.:	PI	none Number: _()	
ame:				
	Last	First	Middle	
l Names Used I	n the Past:			
esent Address:				
	Street	City	State	Zip
rmanent Addre	5 66.			
	Street	City	State	Zip
sidence Addre	sses during the Past Five Years:			
Str	reet	City	State	Zip
Str	reet	City	State	Zip
Str	reet	City	State	Zip
Str	reet	City	State	Zip
ver's License In	formation: State:	Number:	Expiration	Date:
strictions or Sus	spensions: (respond fully if drivi	ng is required by the job for w	hich you are applying)_	
e you 18 years o	of age or older? Yes N	0		
ou are under 1	8, can you provide proof of you	r eligibility to work? Yes	No	
e you eligible to	work in the United States? Ye	es No		
mes of Any Rela	ative Working For the Company	<u>/:</u>		
ferred By/ Lear	ned of the Company From:			
ve you ever bee m employment	en disciplined for discrimination ? Yes No	n, harassment or violation of	company policies; fired;	or asked to re
Yes." please ide	entify the former employer and	explain:		
, p	, , ,	·		

EMPLOYMENT DESIRED:			
Position:	Date You Ca	an Start:	Expected Pay Rate:
Are You Employed Now?	Present Em	ployer:	
May we contact your present employer?	Yes	No	
Have You Ever Worked For the Company?	,	If So, When	?
Have You Ever Applied to the Company?		If So, When	?
You Are Available to Work: (Full-Time, Pa	rt-Time, Shif	t-Work, Temp	orary, On-Call, Weekend, or Overtime)
If hired would you have a reliable means	of transport	ation to and fi	om work?
Are you able to perform the duties of the including regular attendance?	-	which you are	e applying, with or without reasonable accommodation
U.S. Military or Naval Service? Yes No	Rank:		Nature of Discharge:
•			ot necessarily be a bar to employment. Lars Andersen & ness and nature of the violation, and rehabilitation of the
If "Yes" describe the conviction including t since the conviction:	he nature of	the offense, t	he date of conviction, and the rehabilitative efforts taker
judicially sealed, statutorily eradicated, or or the conviction related to possession of	you successf marijuana an	fully complete and the convicti	the misdemeanor conviction has been expunged, d probation or a pretrial or port-trial diversion program, on is more than two-years old.) The date of conviction, and the rehabilitative efforts
Have you been arrested for a crime for who ther than for possession of less than one	-	-	on bail or on your own recognizance pending trail, than two years ago? Yes ""No
If "Yes," describe the reason given for the date set for trail:	arrest includ	ing the nature	of the alleged offense, the date of the arrest, and the
Have you used illegal drugs within the pas	st six (6) wee	eks? Yes	No
If "Yes," state which illegal drugs you used	and when:		

EDUCATION AND SKILLS:

helpful to us in considering your

application.

		High School			(_	Jniversity	У	Graduate/ Professional				
School Name and Location													
Years Completed	9	10	11	12	1	2	3	4	1	2	3	4	
Diploma/Degree													
Describe Course of Study													
Describe any speci- training, apprentic or extra-curricular are relevant to the you are applying.	eship, activi	, skills ties that											
Describe any honors, scholarships, appointments or awards you have received.													
State any addition		v he											

	Indicate Any F	nd/or Write:	
	Fluent	Good	Fair
SPEAK			
READ			
WRITE			

List any job-related professional or technical organizations to which you belong:								
-	ist professional, trade, business or civic activities and offices held. You may exclude information that would reveal sex, ace, religion, national origin, age, ancestry, disability, or other protected status:							
List any professio	nal or vocational certificate	s, licenses, or registra	tions that you cu	rrently hold or have	held in the past:			
Has any disciplina If "Yes," please ex	ary action been taken with replain in detail:	espect to your license	?? Yes No					
	<u>'ERS:</u> sent or last job. Include any jol iin any gaps in employment.	b-related military servic	e assignments and	volunteer activities. D	o not exclude any			
1. Employer		Dates E	mployed	Hourly Ra	ate/Salary			
Address		From	То	Starting	Final			
Telephone Number(s)	Work Performed	1	l l				
Your Job Title	Your Supervisor's Name							
Reason for Leaving	<u> </u>							
2. Employer		Dates E	Dates Employed		ate/Salary			
Adduses		From	То	Starting	Final			
Address								
Telephone Number(s)		Work Performed						
Your Job Title	Your Supervisor's Name							
Reason for Leaving								

		From	То	Starting	Final			
Add	Address							
Tel	ephone Number(s	5)	Work Performed					
Υοι	ır Job Title	Your Supervisor's Name	1					
Rea	ason for Leaving		L					
1 F	Employer		<u> </u>			D /C .		
7	imployer			mployed _		Rate/Salary		
۸۵۰	dress		From	То	Starting	Final		
Add	uress							
T-'	ambama Niverby /		Mank Darfarra					
rel	ephone Number(s	5)	Work Performed					
			4					
You	ır Job Title	Your Supervisor's Name						
Dos	ason for Leaving							
ne:	ason for regality							
5. Employer			Dates E	mployed	Hourly Rate/Salary			
			From	То	Starting	Final		
Add	dress							
Tel	ephone Number(s	5)	Work Performed					
You	ur Job Title	Your Supervisor's Name	1					
Rea	ason for Leaving							
RFF	ERENCES: List t	three non-employment references	who are not related	to you, and have k	nown vou for at leas	t one vear.		
<u> </u>		23 Spio j menere references		, ca, and nave ki	, 50 151 01 1005	,		
1								
Ι.	Name		Address					
	·······		, tadi ess					
	Telephone		Business			Years Acquainted		
2								
•	Name		Address					
,								
	Telephone		Business			Years Acquainted		

Dates Employed

Hourly Rate/Salary

3. Employer

Name	Address	
Telephone CASE OF EMERGENCY NOTII	Business	Years Acquainted
lame	Address	
ome Telephone	Cellular Telephone	Business Telephone

I understand and acknowledge the following:

- 1. If I am offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the U.S.
- 2. I understand that, if I am employed, any false statement, misrepresentation, or omission of facts on this application, on my supporting documents, or in any interview, regardless of when discovered to be false or omitted, may result in my immediate dismissal.
- 3. I understand that I will be required to possess a current and valid California Driver's License and provide proof of automobile insurance if my job requires me to drive in the course of my work.
- 4. I agree that, if I am offered a position, it will be offered on condition that my employment shall be at will and for no definite period. My employment may be terminated at any time with or without prior notice. In addition, all terms and conditions of my employment shall be at will and subject to modification by the Company at any time. I understand that. Except for the Vice-President or the President of the Company has the authority to enter into any agreement for condition. Only the Vice-President or the President of the Company has the authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the terms of this paragraph and any agreement different than this paragraph is unenforceable unless it is in writing and signed by the Vice-President or the President of the Company.
- 5. I understand and agree that as a condition of my employment I may be required to undergo a medical examination.
- 6. I understand and agree that as a condition of my employment, I may be required to undergo drug testing, and any other testing to the extent permitted by applicable laws.
- 7. I understand and agree that, if I am offered a position, it may be a conditional offer based on my successful passing of both a drug and alcohol screen and a post-offer medical examination. I agree that failure to pass the test/examination, refusal to cooperate with the administration of the test/examination, or any attempt to improperly affect the results of the test/examination will result in the withdrawal of any offer or termination of employment if already employed.
- 8. If I am offered employment, I will, as a condition of employment, furnish proof that I am over 18 years of age.
- 9. I agree that, if I am offered employment, I will be required to conform to the rules and regulations of the Company and sign an Employee Handbook acknowledgement form and other documents signed by new employees which may include a background investigation authorization, a drug testing authorization, a mandatory arbitration agreement and a confidentiality agreement.
- 10. I authorize investigation of all statements contained in this application and any supporting documents. I authorize the Company to secure information about my experience from former employers, educational institutions, government agencies, or any references I have provided, and for those parties to provide information concerning my experience and I hereby release all parties from any liability arising from such investigation.
- 11. I understand that no supervisor or manager may alter or amend the conditions set forth in paragraphs one (1) through (10) above. I understand that the foregoing conditions can only be altered or amended by a written agreement signed by the Vice-President or President of the Company. I hereby agree to submit any dispute arising out of my submission of this application or arising after I am hired to binding arbitration pursuant to the Company's alternative dispute resolution policy. I agree that I will have no right to jury trial arising from my submission of this application or my employment should I be offered employment.

BY	SIGNING	BELOW I	ACKNOWLEDGE	THAT	I HAVE	READ,	UNDERSTOOD	AND	AGREED	TO	THE	CONTENTS	OF	THIS
ĒΝ	APLOYMEN	NT APPLICA	ATION.											

Date	Applicant's Signature