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APPLICATION FOR EMPLOYMENT

Copy World is an equal opportunity employer and selects the best matched individual for the job based upon job related qualifications, regardless of race, color, creed, national origin, sex, age, marital status, sexual preference, or a physical or mental disability.

THANK YOU FOR YOUR INTEREST IN COPY WORLD. IF YOU NEED HELP TO FILL OUT THE APPLICATION FORM OR FOR ANY PHASE OF THE EMPLOYMENT PROCESS, PLEASE NOTIFY THE PERSON THAT GAVE YOU THIS FORM AND EVERY EFFORT WILL BE MADE TO ACCOMMODATE YOUR NEEDS IN A REASONABLE AMOUNT OF TIME.

PERSONAL INFORMATION

LAST NAME	FIRST	MIDDLE	DATE
STREET ADDRESS			HOME PHONE
CITY, STATE, ZIP		SOCIAL SECURITY NUMBER	BUSINESS/MESSAGE PHONE
POSITION DESIRED		DRIVER'S LICENSE NUMBER	PAY DESIRED
HAVE YOU EVER APPLIED FOR EMPLOYMENT WITH US? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WHEN: _____ POSITION: _____			DATE AVAILABLE FOR WORK
ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES?			ARE YOU 18 YEARS OR OVER?
ARE YOU AVAILABLE FOR FULL-TIME WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, WHAT DAYS, HOURS CAN YOU WORK?			
PLEASE REVIEW THE JOB DESCRIPTION FOR THE POSITION YOU ARE APPLYING FOR. ARE YOU ABLE TO PERFORM THESE TASKS WITH OR WITHOUT AN ACCOMMODATION? <input type="checkbox"/> WITH <input type="checkbox"/> WITHOUT IF YOU HAVE INDICATED THAT YOU CAN PERFORM THE REQUIRED TASKS WITH AN ACCOMMODATION; HOW WOULD YOU PERFORM THE TASKS, AND WITH WHAT ACCOMMODATIONS? _____ _____ _____			
HAVE YOU EVER BEEN CONVICTED OF A FELONY? IF YES, GIVE ALL DATES, PLACES, CHARGES, AND DISPOSITION. CONVICTION WILL NOT NECESSARILY BAR YOU FROM EMPLOYMENT CONSIDERATION. <input type="checkbox"/> YES <input type="checkbox"/> NO			

EDUCATION/TRAINING

SCHOOL	NAME AND LOCATION	COURSE OF STUDY	NUMBER OF YEARS COMPLETED	GRADUATION DATE	DEGREE/DIPLOMA OBTAINED
HIGH SCHOOL					
COLLEGE					
VOCATIONAL OR TECHNICAL					
OTHER					

Typing Speed _____ Shorthand Speed _____ Other Office Machines _____

SPECIAL SKILLS

You may exclude those which indicate your race, creed, sex, marital status, age color, national origin, or disability. Include skills such as bilingual, honors, awards, publications, patents, professional societies and other extra curricular activities which may relate to the job you are applying for.

EDUCATION/TRAINING

List all work experience including military, beginning with your present or last position.

1	EMPLOYER	TELEPHONE ()	INDICATE IF <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME
	ADDRESS		EMPLOYED (STATE MONTH AND YEAR) FROM TO
	NAME AND TITLE OF SUPERVISOR		PAY START END
	STATE JOB TITLE AND DESCRIBE YOUR DUTIES		REASON FOR LEAVING
2	EMPLOYER	TELEPHONE ()	INDICATE IF <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME
	ADDRESS		EMPLOYED (STATE MONTH AND YEAR) FROM TO
	NAME AND TITLE OF SUPERVISOR		PAY START END
	STATE JOB TITLE AND DESCRIBE YOUR DUTIES		REASON FOR LEAVING
3	EMPLOYER	TELEPHONE ()	INDICATE IF <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME
	ADDRESS		EMPLOYED (STATE MONTH AND YEAR) FROM TO
	NAME AND TITLE OF SUPERVISOR		PAY START END
	STATE JOB TITLE AND DESCRIBE YOUR DUTIES		REASON FOR LEAVING
4	EMPLOYER	TELEPHONE ()	INDICATE IF <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME
	ADDRESS		EMPLOYED (STATE MONTH AND YEAR) FROM TO
	NAME AND TITLE OF SUPERVISOR		PAY START END
	STATE JOB TITLE AND DESCRIBE YOUR DUTIES		REASON FOR LEAVING

May we contact the employers listed above? YES NO If "Yes," indicate number(s) above, and also indicate the best time of day to contact employer.

Other names under which your former employers would know you: _____

Positions that require operating a company vehicle must submit, upon acceptance of a formal employment offer, a current motor vehicle report (MVR), that is not more than three days old. MVR's will be reviewed to determine the individual's insurability based on Copy World's insurance carrier and company policy. Failure to be insured may be cause for termination of employment.

I authorize Copy World to investigate all information provided on this application. Continued employment is contingent on Copy World verifying all the information presented on my application.

I understand that falsification of data so given may prevent me from being offered employment, or if hired, will subject me to immediate termination for cause.

In consideration of my employment, I agree to conform to Copy World's policies and procedures. I understand that no manager or representative of Copy World, other than the General Manager or Owner has any authority to enter into any agreement for employment, or to make any agreement contrary to the information contained in this application.

In absence of a written contract, I understand that my employment and compensation may be terminated with or without cause, and with or without notice, at any time, at the option of either Copy World or myself.

I have read and understand the above.

Date: _____ Signed: _____