



West Coast Quartz Corporation
 1000 Corporate Way · Fremont, CA 94539
 Tel: (510) 249-2160 · Fax: (510) 651-1755

EMPLOYMENT APPLICATION
(Attach Resume If Available)

PLEASE PRINT OR TYPE

Date: _____

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, or other protected classification.

BACKGROUND INFORMATION

Full Name _____

LAST
FIRST
MIDDLE

Address _____

STREET & NO.
CITY
STATE
ZIP

Mailing address, if different than above _____

Telephone Nos. _____

AREA CODE NUMBER (DAYTIME)
AREA CODE NUMBER (EVENING)

Are you over 18 years of age? Yes No

Driver's License No. _____ **State** _____

Can you, after employment, submit verification of your legal right to work in the United States? Yes No

Have you been convicted of a felony or serious misdemeanor within the last seven years? (Convictions for marijuana-related offenses that are more than two years old need not be listed.) Yes No

A conviction will not necessarily disqualify an applicant for employment.

POSITION DESIRED

Type of Position Desired _____ **Date Available** _____ **Wage or Salary Desired \$** _____

Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodation? Yes No

If no, describe the essential functions that cannot be performed. _____

How did you learn about this opening?

<input type="checkbox"/> Advertisement <input type="checkbox"/> Employment Agency <input type="checkbox"/> Walk In	<input type="checkbox"/> Friend <input type="checkbox"/> Relative <input type="checkbox"/> Other
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Have you been employed with West Coast Quartz Corporation before? If yes, When? _____

¹ Employers should be mindful of a relatively new law that prohibits printing an individual's social security number on any material that are mailed to the individual. See Calif. Civil Code § 1798.85(a)(5). Although the statute explicitly allows "applications and forms" sent by mail to include social security numbers, a plausible interpretation of the law is that this allows employers to mail employees forms or applications with a blank for the social security number. It is then up to the employee to decide whether to use the mail system to return the completed application to the employer.

EDUCATIONAL BACKGROUND

LEVEL	NAME AND LOCATION	COURSE OF STUDY	No. OF YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA RECEIVED
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Undergraduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Post-Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other:				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other:				<input type="checkbox"/> Yes <input type="checkbox"/> No	

SPECIAL SKILLS AND QUALIFICATIONS

Summarize any special job-related skills or qualifications that you possess (do not include any information that would reveal sex, race, religion, national origin, age, ancestry, marital status, disability, or any other protected status):

(If Additional Space Is Required, Please Use Back Of Application.)

REFERENCES

Please list three persons whom we can contact, and who are able to evaluate your job knowledge and ability.

May we contact your present employer? Yes No

NAME	ADDRESS AND TELEPHONE NUMBER	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			
4.			

EMPLOYMENT HISTORY

May we contact your present employer? Yes No

Most Recent Employer:		Address:	
Date Started:	Starting Salary: \$ Per		
Date of Separation:	Salary on Leaving: \$ Per		
Name and Title of Supervisor	Reason for Leaving:		
Description of Duties:			

Most Recent Employer:		Address:	
Date Started:	Starting Salary: \$ Per		
Date of Separation:	Salary on Leaving: \$ Per		
Name and Title of Supervisor	Reason for Leaving:		
Description of Duties:			

Most Recent Employer:		Address:	
Date Started:	Starting Salary: \$		Per
Date of Separation:	Salary on Leaving: \$		Per
Name and Title of Supervisor	Reason for Leaving:		
Description of Duties:			

Most Recent Employer:		Address:	
Date Started:	Starting Salary: \$		Per
Date of Separation:	Salary on Leaving: \$		Per
Name and Title of Supervisor	Reason for Leaving:		
Description of Duties:			

CERTIFICATION:

I certify that any and all statements which I have set forth in this application are true and correct to the best of my knowledge. I also recognize that any misstatement I have made herein may subject me to discharge at any time in the event that I am hired. I authorize West Coast Quartz Corporation to investigate and make inquiries concerning my previous employment and other information I have provided in this application. I hereby release West Coast Quartz Corporation, any agency appointed by West Coast Quartz Corporation, and all persons and employers from any liability on account of or arising out of the exchange of such information. I further understand that my continued employment, if I am hired by West Coast Quartz Corporation may be contingent upon satisfactorily passing a prescribed physical examination at any time, to establish my fitness or capability to properly perform the work required. If I am offered employment, I agree that prior to or at the commencement of my employment I will provide original documents to West Coast Quartz Corporation, which verify my identity and right to work under the Immigration Reform and Control Act of 1987 ("IRCA"), I also agree the West Coast Quartz Corporation may provide photocopies of the form on which my identity and right to work is verified (the "I-9 Form") and any supporting documentation submitted by me to any person who, in connection with effecting compliance with IRCA, has legitimate interest in the information contained therein.

DATE _____

SIGNATURE _____