



Corinthian International

Parking Services

We consider all applicants without regard to race, color, religion, creed, gender, national origin, disability, veteran status or any other legally protected status.

| APPLICATION FOR EMPLOYMENT | | | | | Date of Application |
|---|-------------------|-------------------------------------|--|--------------------------------------|-------------------------|
| Last Name | | First Name | | Middle Initial | |
| Address (Street Number and Name) | | | | City | |
| State | Zip Code | Residential Phone | | Cellular Phone | |
| How did you learn about us? | | | | | |
| <input type="checkbox"/> Advertisement | | <input type="checkbox"/> Friend | | <input type="checkbox"/> Inquiry | |
| <input type="checkbox"/> Employment Agency | | <input type="checkbox"/> Relative | | <input type="checkbox"/> Other _____ | |
| Have you ever filed an application with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| If Yes, give date _____ | | | | | |
| Have you ever been employed with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| If Yes, give date _____ | | | | | |
| Do any of your friends for C.I.P.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| If Yes, state name _____ | | | | | |
| Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| What is your desired hourly rate of pay? _____ | | | | | |
| Can you travel if a job requires it? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Are you related by blood or marriage to any person now working for C.I.P.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | |
| If yes, give name and relationship to you. _____ | | | | | |
| CHECK the types of work you will accept: <input type="checkbox"/> 1. Full-time <input type="checkbox"/> 2. Part-time <input type="checkbox"/> 3. Temporary/Seasonal | | | | | |
| If you are not available for work now, enter the earliest date you could begin work (mo/day/yr) _____ | | | | | |
| Job Applied For: | | | | | |
| Enter below the specific titles of the jobs for which you are applying. | | | | | |
| Job Title: _____ | | | Job Title: _____ | | |
| EDUCATION | | | | | |
| School | Name and Location | Dates Attended (mo/yr) From: To: | Grad? YES <input type="checkbox"/> NO <input type="checkbox"/> | # of years completed | Type of Degree Received |
| High School | | | | | |
| College(s) or University(s) | | | | | |
| Graduate or Professional | | | | | |
| Other educational, vocational school, internships, etc. | | | | | |
| Special training programs, courses and seminars you have completed in the last five years (list): _____ | | | | | |

LICENCES:

| | | | | | |
|--------------------------|---------------------|-------|--------------------------|-------|----------|
| <input type="checkbox"/> | Driver's License | _____ | <input type="checkbox"/> | Other | _____ |
| | Types | State | Endorsements | | Describe |
| <input type="checkbox"/> | Chauffeur's License | _____ | | | |
| | Types | State | Endorsements | | |

Have you ever been convicted of an offense against the law other than a minor traffic violation? (A conviction does not mean you cannot be hired. The offense and how recently you were convicted will be evaluated in relation to the job for which you are applying.) YES NO (If yes, explain fully on page 3)

WORK HISTORY (include volunteer experience) Use additional sheets if necessary. As you describe your work history experiences, make sure you highlight your competencies which demonstrate your qualifications for the position for which you are applying.

| | | | | | |
|--|--|--|--------------------|---|--|
| Current or Last Employer: | | Address: | | | |
| Job Title: | | Supervisor's Name | Telephone Number | # Supervised by you: | |
| Date Employed (mo/yr) | Starting Salary \$ _____ per | Ending or Current Salary \$ _____ per | Reason for Leaving | May We Contact Employer YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Date Separated (mo/yr) | List major duties that demonstrate your competencies related to the position for which you are applying in order of their importance in the job: | | | | |
| Full Time Years Months | | | | | |
| Part Time Years Months | | | | | |
| If part time, number of hours worked per week: | | | | | |
| Employer: | | Address: | | | |
| Job Title: | | Supervisor's Name | Telephone Number | # Supervised by you: | |
| Date Employed (mo/yr) | Starting Salary \$ _____ per | Ending or Current Salary \$ _____ per | Reason for Leaving | | |
| Date Separated (mo/yr) | List major duties that demonstrate your competencies related to the position for which you are applying in order of their importance in the job: | | | | |
| Full Time Years Months | | | | | |
| Part Time Years Months | | | | | |
| If part time, number of hours worked per week: | | | | | |
| Employer: | | Address: | | | |
| Job Title: | | Supervisor's Name | Telephone Number | # Supervised by you: | |
| Date Employed (mo/yr) | Starting Salary \$ _____ per | Ending or Current Salary \$ _____ per | Reason for Leaving | | |
| Date Separated (mo/yr) | List major duties that demonstrate your competencies related to the position for which you are applying in order of their importance in the job: | | | | |
| Full Time Years Months | | | | | |
| Part Time Years Months | | | | | |
| If part time, number of hours worked per week: | | | | | |

Comments: Include explanation of any gaps in employment: _____

APPLICANT'S STATEMENT

I certify that all the answers I have given are true and complete to the best of my knowledge.
I authorize the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.
This application for employment shall be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment after 60 day should reapply.
I hereby understand and acknowledge that unless otherwise defined by applicable law, any employment relationship with C.I.P.S. is of an "At-Will" nature. This means that the Employee may resign at any time and that C.I.P.S. may discharge the Employee at any time, with or without cause. It is further understood that this "At-Will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the President of C.I.P.S.
I understand that upon employment by C.I.P.S., I will be signing additional employment documents regarding "At-Will" employment status.
In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all C.I.P.S. policies and procedures.

Additional Comments:

Signature of Applicant

Date

