



# Application for Employment

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview should notify the Human Resources Administrator of Pan Pacific RV Centers, Inc.

Applicant Name: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_ Zip: \_\_\_\_\_

Hm phone (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_ SS#: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Position applying for: \_\_\_\_\_ Date you can start: \_\_/\_\_/\_\_

Employment type: Full-time- Part-time- Desired salary: \_\_\_\_\_ per hr- mo- yr-

Dealership Location: French Camp- Sacramento- Morgan Hill- \_\_\_\_\_ Roseville-

State name and relationship of anyone in our employ: \_\_\_\_\_

How were you referred to Pan Pacific RV Centers: \_\_\_\_\_

Are you able to meet the attendance requirements? Yes- No-

Do you have any objection to working overtime if necessary? Yes- No-

Can you travel if required by this position? Yes- No-

Have you ever applied with us before? Yes- No-

Have you ever been previously employed by us? Yes- No-

Can you submit proof of legal employment authorization and identity? Yes- No-

If you are under 18, can you furnish a work permit if it is required? Yes- No-

Have you been convicted of a crime in the past 7 years? Yes- No-

If yes, please explain (a conviction will not automatically bar employment): \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_ Expiration date: \_\_/\_\_/\_\_

All employees are required to submit a DMV printout. Will this be a problem? Yes- No-

If yes, please explain: \_\_\_\_\_

All applicants are required to go through pre-employment drug screening at Pan Pacific RV Center's expense. Will this be a problem? Yes- No-

If yes, please explain: \_\_\_\_\_

## Education History

	Name	City	Yrs Completed	Did you Graduate
High School				Yes- <input type="checkbox"/> No- <input type="checkbox"/>
College				Yes- <input type="checkbox"/> No- <input type="checkbox"/>
Other				Yes- <input type="checkbox"/> No- <input type="checkbox"/>

## Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certifications, and/or other qualifications:

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## Employment History

Please provide all employment information for your past four employers starting with the most recent.

Employer: \_\_\_\_\_ Position Held: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_  
Telephone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Supervisor/Title: \_\_\_\_\_  
Dates employed: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ May we contact this employer? Yes- No-  
Job Summary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
Starting salary: \$\_\_\_\_\_ per hr- mo- yr- Ending salary: \$\_\_\_\_\_ per hr- mo- yr-

Employer: \_\_\_\_\_ Position Held: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_  
Telephone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Supervisor/Title: \_\_\_\_\_  
Dates employed: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ May we contact this employer? Yes- No-  
Job Summary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
Starting salary: \$\_\_\_\_\_ per hr- mo- yr- Ending salary: \$\_\_\_\_\_ per hr- mo- yr-

Employer: \_\_\_\_\_ Position Held: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_  
Telephone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Supervisor/Title: \_\_\_\_\_  
Dates employed: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ May we contact this employer? Yes- No-  
Job Summary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
Starting salary: \$\_\_\_\_\_ per hr- mo- yr- Ending salary: \$\_\_\_\_\_ per hr- mo- yr-

Employer: \_\_\_\_\_ Position Held: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_  
Telephone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Supervisor/Title: \_\_\_\_\_  
Dates employed: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ May we contact this employer? Yes- No-  
Job Summary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
Starting salary: \$\_\_\_\_\_ per hr- mo- yr- Ending salary: \$\_\_\_\_\_ per hr- mo- yr-

## Other Information

Please provide us with any other information you think would help us get to know you:

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## References

List 3 references names, telephone numbers and years known (*do not include relatives or employers*):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Emergency Information

Please provide the following information of an individual to be notified in case of an emergency.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Telephone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Additional #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

## Signature Statement

I hereby authorize the Human Resources Department of Pan Pacific RV Centers, Inc. to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, education institutions and references. I also hereby release from liability Pan Pacific RV Centers and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract of employment. Accordingly, in support of the "at will" employment law, either I or Pan Pacific RV Centers can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of Pan Pacific RV Centers, Inc. not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

**I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_