



EMPLOYMENT APPLICATION

All applicants will be considered for positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, sexual expression, sexual identity or any other legally-protected status.
WE ARE AN EQUAL OPPORTUNITY EMPLOYER

THIS APPLICATION MUST BE COMPLETED IN ITS ENTIRETY.
Failure to do so may affect your candidacy for employment.

PLEASE TYPE OR PRINT LEGIBLY

Position(s) Applied for (be specific)	Salary Desired (be specific)	Date of Application
How did you learn about us (please specify) ☐ Advertisement _____ ☐ Referral _____ ☐ Employment Agency _____ ☐ Friend _____ ☐ Other _____		
Last Name	First Name	Middle Name
Address	City	State Zip
Telephone Home: () Work: () Cellular: ()		
Email Address: (1) (2)		

Can you provide required proof of your eligibility to work in the United States? ☐ Yes ☐ No

Have you ever applied for work with Echo Horizon School before? ☐ Yes ☐ No
 If YES, When/Where? _____

Have you ever been employed with us before? ☐ Yes ☐ No
 If YES, When/Where? _____

Have you any friends or relatives in our employ? ☐ Yes ☐ No
 Name(s): _____

If hired, can you provide proof of authorization to work in the United States? ☐ Yes ☐ No

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

If NO, describe the conditions and the nature of your work limitations?

Are you currently employed? ☐ Yes ☐ No If YES, may we contact your current employer? ☐ Yes ☐ No
 On what date would you be available for work? _____

Are you available for work: ☐ Full Time ☐ Part Time ☐ Temporary?
 What days and hours are you available for work?

If hired for a position that requires driving, can you provide proof of a valid driver's license and proof of insurance if requested? ☐ Yes ☐ No

YOU MUST COMPLETE THIS SECTION ATTACHING A RESUME IS NOT SUFFICIENT

Please complete for the positions you have occupied in the last 10 years. Start with your present or last job; include any job-related military service assignments and/or volunteer activities, as well as any periods of unemployment. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or any other legally protected status.

Employer		Date Employed From To	May we contact?
Address			
Contact Phone		Reason for Leaving	Summary of Duties
Job Title			
Supervisor Name	Supervisor Title		

Employer		Date Employed From To	May we contact?
Address			
Contact Phone		Reason for Leaving	Summary of Duties
Job Title			
Supervisor Name	Supervisor Title		

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Supervisor Name	Supervisor Title		

Employer		Date Employed From To	May we contact?
Address			
Contact Phone		Reason for Leaving	Summary of Duties
Job Title			
Supervisor Name	Supervisor Title		

Employer		Date Employed From _____ To _____	May we contact?
Address			
Contact Phone		Reason for Leaving	Summary of Duties
Job Title			
Supervisor Name	Supervisor Title		

SPECIALIZED SKILLS

Please list specialized skills here: _____ _____ _____ _____

EDUCATION

	Name and City of School	Course of Study	Years Completed	Diploma/Degree
High School				
Vocational				
College				
Other (specify)				

For positions where driving for the company is required:

License Number: _____ State: _____

Number of moving violations in the last 5 years: _____ State: _____

Number of accidents in the last 5 years: _____

PROFESSIONAL REFERENCES: Please provide 3 business references who are former or current employers who are knowledgeable of your work performance. Supervisors/Managers preferred. No relatives please.

NAME		RELATIONSHIP	PHONE NUMBER

APPLICANT'S STATEMENT

Please read carefully and sign where indicated.

UNSIGNED APPLICATIONS WILL NOT BE CONSIDERED

I declare under penalty of perjury that the facts contained in this application are true and complete to the best of my knowledge. I understand that any material omission and/or false or misleading information given in my application (and accompanying resume, if any) may disqualify me from further consideration for employment, and will be justification for my dismissal from employment, if discovered at a later date.

I authorize the investigation of all statements contained in this application (and accompanying resume, if any) without providing me with prior notice. I authorize any person, school, current employer (except as expressly noted), past employer(s), and organization named in this application form (and accompanying resume, if any) or provided by me to Echo Horizon School to provide relevant references, background information and opinions that may be useful in making a hiring decision. I understand that as a condition of employment a criminal background investigation will be conducted. I hereby release EHS, and all of the persons, organizations and their agents who are contacted by EHS or EHS's background check vendor for this purpose, from any and all claims of any kind or nature, which may arise now or in the future from or in any way connected with the process of verifying the information you have provided.

I agree to immediately notify Echo Horizon School if I should be convicted of any crime while my job application is pending or during my period of employment, if hired.

I agree that if hired, my employment and compensation is at will and may be terminated with or without cause, and with or without notice, at any time at the option of myself or Echo Horizon School. I agree that no agreement which is contrary to this at-will employment relationship shall be effective unless it is contained in a specific, express written contract which is signed by the Head of School and me.

I understand that any employment offer is conditioned upon satisfactory proof of my identity and legal ability to work in the United States in accordance with the Immigration Reform and Control Act of 1986 and its amendments.

If requested by management at any time, I authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the duties of my job during my employment

If employed, I understand that as a condition of employment, no employee may use, possess, distribute, manufacture, dispense, or sell alcohol or any illegal drug while on the property of Echo Horizon School

I understand that if I am employed, my employment is at-will and that this is an application for employment and that no employment contract is being offered, and that if I am employed, such employment is for no definite period of time and that Echo Horizon School may change wages, benefits, and conditions at any time.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that if employed, I am required to abide by all rules and regulations of Echo Horizon School.

I have read, understand, and agree to the information above.

Signature of Applicant

Date

Echo Horizon School conducts background checks and may search public records. I am entitled to copies of any such public records obtained by the School unless I checkmark the statement below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below. "Public records" are defined by California state law and means records documenting an "arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment." (Civil Code section 1786.53).

I waive receipt of a copy of any public record described in the paragraph above. _____

Echo Horizon School/Echo Center/Echo Foundation, Inc. has the right to terminate employment if any information on this document or the background check and/or livescan contains falsified information.