



EMPLOYMENT APPLICATION

OUR VALUES

- I**ntegrity
- M**easurable Difference
- P**ractice What We Preach
- A**ccountable
- C**ustomer-Centered
- T**eamwork

ALULA, a CLG Company, is an equal employment opportunity (EEO) employer for all employees and applicants for employment without regard to discrimination or harassment on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, disability, marital status, citizenship, national origin, genetic information, military status, or any other characteristic covered in accordance with applicable federal, state, and local laws. In compliance with the Immigration Reform and Control Act of 1988, we will hire only U.S. Citizens and Aliens lawfully authorized to work in the U.S. Should you be employed by ALULA you will be required to complete and sign Form I-9 Employment Eligibility Certification. The receipt of this application does not mean that vacant positions exist and does not obligate ALULA in any way.

PERSONAL INFORMATION (Please print)

Name	Last	First	Middle	Date
Present Address, City, State, Zip Code				
Phone Number		Email Address		
Other name(s) by which you have been employed:				

WORK PREFERENCES

Position(s) Desired	Salary Expected \$
Days and Hours Available (check all that apply) <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Nights <input type="checkbox"/> Monday to Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday	Will you accept: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Summer <input type="checkbox"/> Other: _____
How did you hear about ALULA? <input type="checkbox"/> Advertisement <input type="checkbox"/> Relative working at ALULA (name): _____ <input type="checkbox"/> Online job posting <input type="checkbox"/> Current employee: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Colleague: _____	
Have you previously applied for a position with ALULA? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____ Have you ever been employed by ALULA? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, in what position and when? _____ If your name has changed since you last worked for ALULA, provide previous name: _____ May we contact your current employer for a work reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> After notice is given	

EDUCATION

NAME OF SCHOOL	ADDRESS	GRADUATE?	DEGREE/DIPLOMA ACHIEVED
High School/G.E.D.	City, State	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University	City, State	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate	City, State	<input type="checkbox"/> Yes <input type="checkbox"/> No	

NAME OF SCHOOL	ADDRESS	GRADUATE?	DEGREE/DIPLOMA ACHIEVED
Other Professional/Trade, etc.	City, State	<input type="checkbox"/> Yes <input type="checkbox"/> No	

SPECIALIZED TRAINING AND EXPERIENCE

List any special qualifications not covered elsewhere on this application.	
Please list software programs you are proficient in:	Other special skills/training:

EXPERIENCE

List all employment for the past ten years with your most recent position listed first. Attach additional sheets if necessary.	
Company Name	Title of Position You Held
Street, City, State, Zip Code of Employer	Supervisor's Name and Position
Telephone	Reason For Leaving
Dates Employed: From: To:	

Company Name	Title of Position You Held
Street, City, State, Zip Code of Employer	Supervisor's Name and Position
Telephone	Reason For Leaving
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Company Name	Title of Position You Held
Street, City, State, Zip Code of Employer	Supervisor's Name and Position
Telephone	Reason For Leaving
Dates Employed: From: To:	

The information in this application is true to the best of my knowledge. I understand that misrepresentation or omission of facts requested in the application may result in refusal to hire or in dismissal during employment. In consideration of my employment, I agree to conform to the rules and regulations of ALULA. I also agree that my employment and compensation can be terminated at will (i.e. with or without cause, and with or without notice, at any time, at the option of either the firm or myself). I understand that only an Officer or Director of People Systems has the authority to enter into any agreement for employment and that any such agreement must be in writing and signed.

Having made application to ALULA for employment, I do hereby authorize the furnishing, without liability, of records and other information that ALULA may request now or in the future in its evaluation of my qualifications for employment.

Signature

Date