

# APPLICATION FOR EMPLOYMENT

*(CU HOLDINGS, INC. - An Equal Opportunity Employer)*

**PERSONAL INFORMATION**

**DATE**

DATE OF BIRTH

NAME

LAST

FIRST

MIDDLE

PRESENT ADDRESS

STREET

CITY

STATE

ZIP

MAILING ADDRESS

STREET

CITY

STATE

ZIP

PHONE NO. *(mobile)*

*(home)*

*(other)*

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED  
IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS?

Yes  \_\_\_\_\_ No  \_\_\_\_\_

**EMPLOYMENT DESIRED**

DATE YOU CAN START

SALARY DESIRED?

POSITION

ARE YOU EMPLOYED NOW?

IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?  
(Name of company & title/position)

EVER APPLIED TO THIS COMPANY BEFORE?

WHEN & FOR WHAT POSITION?

**REFERRED BY WHOM / HOW DID YOU HEAR OF US?**

EDUCATION	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE? <i>If so, when?</i>	MAJOR/ CONCENTRATION
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

**SKILLS / CONCENTRATION / HOBBIES & INTERESTS**

SKILLS:

CONCENTRATION *(i.e., Major/Degree; Focus of Research Study, etc.):*

HOBBIES/INTERESTS:

U. S MILITARY OR  
NAVAL SERVICE

RANK

PRESENT MEMBERSHIP IN  
NATIONAL GUARD OR RESERVES

\*This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26, 1991.

LAST

FIRST

MIDDLE

**FORMER EMPLOYERS** (LIST BELOW LAST THREE EMPLOYERS, YOU MAY USE AN EXTRA SHEET FOR MORE DETAILS).

DATE MONTH AND YEAR	NAME & PHONE NUMBER OF EMPLOYER	SALARY	POSITION	REASON(S) FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

**DO YOU HAVE A VALID GUAM DRIVER'S LICENSE?**

HAVE YOU EVER BEEN ARRESTED? IF SO, PLEASE EXPLAIN.

**REFERENCES:** GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	PHONE NUMBER(S)	BUSINESS & RELATION	YEARS ACQUAINTED
1			
2			
3			

**IN CASE OF AN EMERGENCY NOTIFY:** *Please provide name(s), phone number(s) & any other contact info:*

*Signature of Applicant*

\_\_\_\_\_

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED. MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE. AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRONG AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.

DATE SIGNATURE

**DO NOT WRITE BELOW THIS LINE**

INTERVIEWED BY: DATE:

REMARKS:

SKILLS:

HIRED:  Yes  No POSITION DEPT.

SALARY/WAGE: \$ DATE REPORTING TO WORK:

APPROVED: 1. SUPERVISOR (GM/DEPUTY GM) 2. VICE PRESIDENT OF OPS/ADMIN 3. HUMAN RESOURCES MANAGER