

HOW TO APPLY:

MUST review the complete job description before applying: www.ypic.com

Application can be downloaded online, submitted in person, via regular mail or emailed to HumanResources@ypic.com. The Application is also available at 3834 W 16th Street, Yuma, AZ 85364 Monday thru Friday between 8:00a.m. to noon, and 1:00p.m. to 5:00p.m.

YPIC observes Holidays.

RESUME ONLY accepted as an attachment.

Deadline to submit application: Open Until Filled.

YPIC application begins on next page



Yuma Private Industry Council, Inc.
 3834 W. 16th St
 Yuma, AZ 85364
 (928) 329-0990 TTY: (928) 329-6466

EMPLOYMENT APPLICATION

*This is an Equal Opportunity Employer/Program.
 Auxiliary aids and services are available upon request to individuals with disabilities.*

PERSONAL

Name _____
 (Last) (First) (Middle)

Mailing Address _____
 (Street or P.O. Box) (City) (State) (Zip Code)

Telephone _____ Cell Phone _____
 (Area Code and Phone Number) (Area Code and Phone Number)

E-mail Address _____

Driver's License Number _____ State _____ Expiration Date _____

Have you ever been convicted of a felony? Yes No Explain Felony: _____

JOB INTERESTS/SKILLS

Position applied for _____

Were you previously employed by us? Yes No If yes, when? _____

Type of employment requested: Full Time Part Time Temporary Summer

Do you have relatives working for our agency? Yes No If yes, who? _____

Summarize any other special skills or qualifications (ie: typing wpm, computer knowledge, licenses, registrations or certifications you possess)

EDUCATION

| TYPE OF SCHOOL | NAME AND LOCATION | COURSE OF STUDY | NUMBER OF YEARS | DEGREE, DIPLOMA, CERTIFICATE RECEIVED |
|--|-------------------|-----------------|-----------------|---------------------------------------|
| HIGH SCHOOL* <small>If you did not graduate from high school, did you receive a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No</small> | | | | |
| COLLEGE OR UNIVERSITY | | | | |
| OTHER EDUCATION | | | | |
| OTHER EDUCATION | | | | |

EMPLOYMENT HISTORY (LIST MOST RECENT FIRST) Account for all time during the last 5 years including periods of unemployment. List any other work experience that may qualify you for a position. Attach additional pages if necessary.

1. Name of Employer _____

Address _____ Phone _____
(Street) (City) (State) (Zip Code)

Supervisor's Name and Title _____ Your Title _____

Employed From _____ To _____ Starting Salary _____ Ending Salary _____ Hrs. Per Week _____
(Mo. / Yr.) (Mo. / Yr.)

Work Performed _____

Reason for leaving _____

May we contact your current employer? Yes No

2. Name of Employer _____

Address _____ Phone _____
(Street) (City) (State) (Zip Code)

Supervisor's Name and Title _____ Your Title _____

Employed From _____ To _____ Starting Salary _____ Ending Salary _____ Hrs. Per Week _____
(Mo. / Yr.) (Mo. / Yr.)

Work Performed _____

Reason for leaving _____

3. Name of Employer _____

Address _____ Phone _____
(Street) (City) (State) (Zip Code)

Supervisor's Name and Title _____ Your Title _____

Employed From _____ To _____ Starting Salary _____ Ending Salary _____ Hrs. Per Week _____
(Mo. / Yr.) (Mo. / Yr.)

Work Performed _____

Reason for leaving _____

REFERENCES List 3 persons (preferably local) who are not related to you.

| <i>Name</i> | <i>Relationship</i> | <i>Daytime Phone</i> |
|-------------|---------------------|----------------------|
| | | |
| | | |
| | | |

Yuma Private Industry Council Employment Application

1. How did you learn about this position?

2. If this position were offered to you, how soon would you be able to start?

3. How many years and/or months experience have you had in this field?

4. If unemployed, please explain why.

5. Briefly explain why you believe you are best suited for this position.

Your response will be treated confidentially. Some responses will be used for further exploration. Thank you for your interest in the employment opportunities at the Yuma Private Industry Council, Inc.

ACKNOWLEDGEMENT

OUR AGENCY TRAINS YOUTH, THEREFORE ALL EMPLOYEES MUST BE FINGERPRINTED, and DRUG TESTED.

I certify that the answers given by me in this application are correct to the best of my knowledge. I understand that any falsification of this application, whether willingly or accidental, is grounds for disqualification of employment consideration, or dismissal from employment if I am hired. I authorize the company to contact any and all of the references I have listed above to obtain previous employment information or any other pertinent information that they may have. Further, I release the above mentioned references from any and all liability for any damages that may result from information collected by this company. Verification of eligibility to work in the United States must be satisfied upon hire.

Applicant's Signature _____ Date _____

USAintel

“Specialized Information Gathering”

BACKGROUND VERIFICATION DISCLOSURE

As part of the employment process, **Yuma Private Industry Council, Inc.** may obtain a Consumer Report and/or an Investigative Consumer Report. The Fair Credit Reporting Act as amended by the Consumer Reporting Reform Act of 1996 requires that we advise you that for purposes of employment only, a Consumer Report may be made which may include information about your character, general reputation, personal characteristics, or mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided, in the event the Report contains information regarding your character, general reputation, personal characteristics, or mode of living.

AUTHORIZATION and RELEASE

During the application process and at any time during any subsequent employment, I hereby authorize USAintel, on behalf of the **Yuma Private Industry Council, Inc.** to procure a Consumer Report which I understand may include information regarding character, general reputation, personal characteristics, or mode of living. This report may be compiled with information from courts record repositories, departments of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature of and scope of the background verification, to the extent such investigation includes information bearing on my character, general reputation, personal characteristics or mode of living.

Applicant's Printed Name

Applicant's Signature

Date

8730 Wilshire Blvd. Suite #412, Beverly Hills, CA 90211
Phone: (888) 409-1819 Fax: (310) 623-1820

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BACKGROUND INFORMATION FORM

This is an Equal Opportunity Employer program.
Auxiliary aids and services are available upon request to individuals with disabilities