

GENERA	AL INFORMATION								
Name	Last:	First:	First:		MI:	SSI#:			
Address	Street:	C	ity:		State:		Zip Code:		
How long at address listed above?yearsmonths					Home telephone: ()				
Applying for what position?					Salary/Wage expected:				
Applying for:full timepart time1st shift2nd shift3rd shift					Are you willing to work any day shift(s), including nights, or overtime as assigned?YesNo				
Have you		or Arcadia Communitie	es before?Ye	es _No					
Are you	age 18 or older	?Ye	esNo	Referral	_ 3 _ 3				
If not, do you have a work permit?YesNo				Source:	ource:AgencySchool				
If hired,	can you provide	proof that you			EmployeeWalk-in				
are elig	ible to work in the	e United States?Y	esNo		Job Fair New Acquisition Other				
Have yo	ou ever been conv	icted of a criminal offer	se? _Yes _No	<u> </u>		(Recor	d of charges or		
Have yo	ou ever been conv	icted of a felony?	YesNo			convict	ions do not necessarily		
Are the	re any felony char	rges pending against yo	u?YesNo			disqua	lify applicant from		
If yes to	either question, _I	provide details including	g nature of the cr	ime,		emplo	yment consideration.		
dates a	nd location:					Crimin	al record check will		
						be req	uired as a condition		
						of you	r employment)		
In order to verify your records, please list any other name(s) (i.e. maiden(by which you may have been known:									
EDUCA	TION & TRAINING			I _		1			
		School/Location		Degree		Course/I	Major		
High Sc	hool:								
College	e(s):								
Gradua	te School:								
Business/Vocation:									
Apprentice training or other course:									
		OR PROFESSIONAL MI	MBERSHIPS:						
(Do not include your driver's license)									
REFERENCES Give the names of three persons to be used as work related references.									
Name Addres		Address	ess Phone#		Occupation		ears Acquainted		

EMPLOYMENT HISTORY (Please b	EMPLOYMENT HISTORY (Please begin with your most recent employer. Attach additional sheets if necessary.)								
1. Employer:		Hire Date:	Termination Date:						
Address:		Phone Number: ()							
Your job title:		Supervisor:							
Starting Pay Rate: \$ Fir	nal Pay Rate: \$	May we contact your employer:YesNo							
Describe work performed:		Reason for leaving:							
2 Employers		Hire Date:	Termination Date:						
2. Employer: Address:		Phone Number: ()	Termination Date:						
Your job title:		Supervisor:							
	nal Pay Rate: \$	May we contact your employer:YesNo							
Describe work performed:	iai ray itate. \$	Reason for leaving:							
Describe work performed.		Reason for leaving.							
3. Employer:		Hire Date:	Termination Date:						
Address:		Phone Number: ()							
Your job title:		Supervisor:							
Starting Pay Rate: \$ Fir	nal Pay Rate: \$	May we contact your employer:YesNo							
Describe work performed:		Reason for leaving:							
ANUITA DV INICODANATION									
MILITARY INFORMATION Service branch:	Final Rank:	Sno	ecialty:						
Schools/special training received:	<u> </u>	Тэре	sciarty.						
Current obligations:									
CERTIFICATION & AGREEMENT									
	ommunities (and/or any of its li	censed agents) of information h	neld by any parties regarding my previous						
			ons of any federal, state, local statutes or						
ordinances, military records, medical records, credit history, driving record and scholastic records and hereby release said persons, schools, companies, government agencies, court and law enforcement authorities from any damage whatsoever for releasing this information.									
I certify that all the information I have provided on this application is true and accurate. I understand that misstatements, omissions, or false or misleading statements which I have provided on this application, on my resumé and/or in interview(s) shall constitute grounds for									
refusal to hire or immediate termina	refusal to hire or immediate termination from employment.								
I understand that the terms and conditions of employment may be changed at any time without notice by the company. In consideration									
of employment with Arcadia Communities agree to comply with all the policies, procedures and requirements of Arcadia Communities. I understand this application and/or any Arcadia Communities manual, handbook or other written document describing such items do not									
constitute a written contract at this time or in the future. I understand my employment would be at-will and that my relationship, oral or written, can only accomplished by a written document signed by Arcadia Communities Chairman/President/CEO or Board of Directors.									
I have read and understand the above.									
Thave read and understand the a	above.								
A malian mat/s Sinus advums		Data							
Applicant's Signature		Date							
APPLICANT SHOULD NOT WRITE	BELOW								
Interview by:		Date:							
Recommended action:									
Interview by:		Date:							

Recommended action: