

Employment Application

An Equal Opportunity Employer

Please Print						
09/28/23	VonBorstel	Jordan		Augu	stine	
Date	Last Name	First Name		Middle		
Present Address	wat Du Divavaida CA		CA	92507		
No. & Street	rst Dr Riverside CA	City	State	<u>92307</u> - Zip	·	
	ss (if different from present	ž	State	Σip		
No. & Street		City	State	Zip		
()	<u>(951)</u> 901 - 78	<u> 336</u>				
Business Phone	Home Phone					
Employment Des						
Position applying	for: Software Devel	oper				
What days and ho	urs are you available to wo	ork: M - F / Anytime				
Would you be ava	nilable to work overtime, if	necessary: Yes * No				
If hired, what date	e are you available to start v	work: 10/02/2023Salary	desired:	:N	I/A	
Personal Informa	ation_					
How did you hear	about our company and th	is job opening? Employee Re	ferral			
Have you ever an	nlied to or worked for Chin	no Commercial Bank before?			Yes	 ☐ No [*
					105	
•			=			
·		g for Chino Commercial Bank?			Yes	□ No *
	name(s) and relationship:		_	ام مر ما		
Glen Cot	tle			riend		
Why are you appl	ying for work at Chino Cor	mmercial Bank?				
		ınity to develop a career and wor	k with p	eople that	care.	
	0 0 11		<u> </u>	· ·		
If hired, would you	u have a reliable means of t	transportation to and from work?		* `	l'es 🗌] No
		ire is subject to verification that you		*	Yes [] No
If hired, can you r	present evidence of your U.	S. citizenship or proof of your legal	right to	live		
		T I I I I			res [] No

	h or without reasonable accommodation? Yes No
	If no, describe the functions that cannot be performed.
	·
	(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employee to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.
Are	e you currently employed: Yes * No
If v	ves, may we contact your current employer: Yes * No

		# of years Completed?	Did you <u>Graduate?</u>	Degree or <u>Diploma?</u>
High School	Name and Address	4	<u>*</u> Yes No	<u>Diploma</u>
College/ University	Name and Address	4	<u>*</u> Yes No	B.S. Psycholog
Vocational/ Business	Name and Address		Yes _*_ No	
				MB4 W/ LB
Graduate School	Name and Address	1ated skills training ad	Yes _*_No	MBA - Web Do
School Do you have believe shou	Name and Address any other experience, job related to the considered in evaluating explain:	ated skills, training, ad	ditional languages or other employment.? Yes	er qualifications that * No
School Do you have believe shou	any other experience, job rela	ated skills, training, ad	ditional languages or other employment.? Yes	er qualifications that * No
School Do you have believe shou If so, please	any other experience, job rela	ated skills, training, ad	ditional languages or other employment.? Yes	er qualifications that * No
School Do you have believe should be believed by the believe should be be	any other experience, job related to the considered in evaluating explain:	ated skills, training, ad	ditional languages or other employment.? Yes	er qualifications that * No *
School Do you have believe shou If so, please If the positio Name of lice	e any other experience, job related to the considered in evaluating explain: on requires a license or certification.	ated skills, training, ad g your qualifications fo	ditional languages or other employment.? Yes	er qualifications that * No *

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Corner Stone Delive	ry @ Amazon		(951) 481 - 7766				
Name of Employer			Telephone No.				
Delivery Company			Monte Brown				
Type of Business			Your Supervisor's Name				
20920 Krameria Ave	3 ,		March Air Reserve Bas	e CA	92518	<u> </u>	-
Address & Street			City	State	Zip		
Dates of Employment:	Aug 2023	Present	<u></u>				
	From	То					
Transporting and deli	vering goods in	a timely, sa	fe manner. Reviewing o	rders be	fore and	after de	livery for accurac
Your Position and Duties							
Reason for Leaving							
May we contact this en	nployer for a refe	rence?			* Yes	☐ No	
NOC Volleyball Club	1						
			(562) 506 - 4440				
Name of Employer			Telephone No.				
Athletics Organization	on		Matt Silva				•
Type of Business			Your Supervisor's Name				
161 S Del Giorgio Ro	1,		Anaheim	CA	92808		
Address & Street	Comt 2021	A	City	State	Zip		
Dates of Employment:	Sept 2021	August 2	2023				
	From	То					
Head Coach, Clinic	Coach, S&C Co	ach, Assista	ant Coach				
Your Position and Duties							
Focusing on career	growth and gain	ing experie	nce				
Reason for Leaving							
May we contact this en	nployer for a refe	rence?			* Yes	☐ No	
Have you ever been in	voluntarily termin	nated or aske	ed to resign from any job?		. Yes	* No	
If yes, please explain:	•						
Please explain any gap	s in your employ	ment history	:				

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

Jose	G	arcia		(909) 7	02 - 41	L29		
First Name	Las	st Name		Telephone N				
7559 Bota	any St		Chino		CA	91708 -		
Address & St	reet		City		State	91708 - Zip		
Regional	Sales Manager		4					
Occupation			No. of Years acqua	inted				
Andrew	C	lifton		(562) 33	31 _ 72	230		
First Name	Las	st Name		Telephone N	lo.			
161 S De	l Giorgio Rd		Anaheim		CA	92808 -	-	
Address & St	reet		City		State	92808 - Zip		
Director o	f Boy Volleyball @ NOC	: Volleyball Clu	ıb					
Occupation	, , ,	,	No. of Years acqua	inted				
Trevor	L	au	(661 43	3-7247)	-			
First Name	Las	st Name	•	Telephone N	lo.			
3601 Park	kview Ln, #14D		Irvine		CA	92612 -		
Address & St	reet		City		State	92612 - Zip		
Head Coa	.ch @ NOC Volleyball C	lub	4					
Occupation			No. of Years acqua	inted				
DI D	ad Carefully, Initial Each		10. D.1					
Initials Initials Initials Initials Initials	chances for employment further certify that I, the omission or misstatemen shall be grounds for rejectime elapsed before disconfirmed elapsed elap	undersigned ap at of material fac- ction of this approvery. Commercial B and other matter o disclose to the ving me prior n l other persons, ssing out of or in g contained in th employment, if understand and may be termina and that no pro writing and sig- ral law, all perso plete the require c records (includien or outstand to copies of any ired as a result on the box below.	plicant, have per ct on this application or for in ank to thoroughly a related to my see company any a cotice of such districtions, part any way related a pplication, or hired, is intended agree that if I are ted at any time, mises or represented by me and to the properties of the public records docting judgment) be such public records such information.	sonally comption or on armediate distributed in which is a contract of the company of the contract of the company of the contract of the contr	pleted tiny documentaries emy referemploy, reported dition, and associestigation of the employ out prior arry to be designed arrest, by internal by the titled to a second control of the employ of the employ of the employ of the employer in the employer is designed as a second control of the employer in the employer is designed as a second control of the employer in the employer i	his applicate ment used to if I am employment and, is and other and it is an employment in the foregoing in	further, author information reclease the Comp many and all cosure. w which may tract between may are binding the option of engare binding esentative. eligibility to we the form upon him, conviction, all employed by unless I mark the option of engare the option of engare binding esentative.	nd that any byment ess of the ize the lated to m pany, my laims, me and the e or either on the ork in the re.
09/28/20	23 (///							
Date	Applicant's Sig	gnature						

Additional Employers

	()		
Name of Employer	Telephone No.		
Type of Business	Your Supervisor's Na	ame	
Address & Street	City	State	
Dates of Employment:			
From	Γο		
Your Position and Duties			
Reason for Leaving			
May we contact this employer for a reference	ce?		Yes No
	(
Name of Employer	Telephone No.		
Type of Business	Your Supervisor's Na	ame	
Address & Street	City	State	Zip
Dates of Employment:			
From	Го		
Your Position and Duties			
Reason for Leaving			
May we contact this employer for a reference	e?		Yes No