

17300 Red Hill Avenue, Suite 280 Irvine, California 92614 (949) 852-5575 Fax (949) 852-5582

www.newportpacific.com

Application for Employment in the State of California

| Date of Application: | How did you hear about Newport Pacific? |
|---|---|
| Name: | Email Address: |
| Address: | Telephone: |
| City, State, Zip: | Cell Phone: |
| Position(s) applied for: | Desired Compensation: |
| Are you legally eligible for employn commencement of employment.) | nent in the U.S.: Yes No (Proof of identity and authorization to work in the U.S. is required upor |
| Have you ever been employed by th | e Company before? □ Yes □ No |
| If you are under 18 years of age, car | n you furnish a work permit if you are offered a job? □ Yes □ No |
| Driver's license number, if position ap | oplied for requires driving: State Class |
| Date available to start work:/_ | I am available to work: Full-time: Part-time: Temp: |
| Do you know anyone who is currently | y employed with the Company? □ No □ Yes / If yes, please identify by name: |
| , , , , , , | s, other than English, that may be helpful in the job? □ Yes □ No ou would like the Company to consider: |
| EDUCATIONAL BACKGROUND: | |
| High School Name and Location: | Did you graduate? |
| College Name and Location: | |
| Major/Degree Achieved: | |
| Other Educational Institution(s): | |
| Other Degree / Certification Achieved | t |
| organizations or other experiences the religion, sex, gender (including generation) | Summarize special skills and qualifications acquired from employment, membership in professional hat may qualify you for work with the Firm. Exclude any that indicate race, color, national origin, ancestry ender identity and gender expression), sexual orientation, political affiliations or activities, military, pregnancy, age (over 40), physical or mental disability, medical condition, or any other legally-protected |
| | |
| REFERENCES: | |
| Name and phone number: | |
| Name and phone number: | |
| Name and phone number: | |



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EMPLOYMENT HISTORY:

| Starting with the most recent volunteer activities that are | t, list your prior employers or work experience for the past 10 years. You may chrelated to job experience. | oose to include military service and |
|---|---|---|
| From | _ To | |
| Employer / Address / Phone: | · | |
| Job title and duties: | | |
| Last immediate supervisor ar | nd title: | |
| Reason for leaving: | | |
| From | To | |
| Employer / Address / Phone: | : | |
| Job title and duties: | | |
| Last immediate supervisor ar | nd title: | |
| Reason for leaving: | | |
| From | _To | |
| Employer / Address / Phone: | | |
| Job title and duties: | | |
| Last immediate supervisor ar | nd title: | |
| Reason for leaving: | | |
| | | |
| Pacific Capital Co., Inc. information will constitute g | he foregoing information I have supplied in this application is correct and co ("the Company") to verify the information provided. I understand that any grounds for withdrawal of any employment offer or termination of employment employers and references, and hereby release the Company from any and all lial | falsification or material omission on the falsification of the company permission to |
| the submission of valid doct employment, I will be asked considered in a manner con | ffers of employment are conditioned upon the satisfactory completion of refer umentation that confirms my identity and authorization to work in the United St I to provide information regarding any criminal convictions, which are not neces nsistent with all applicable law. The Company will also consider factors such itation, and the nature of the job. | tates. If I receive a conditional offer of sarily a bar to employment, but will be |
| If hired, and in consideration | of my employment, I agree to comply with the Company's rules, policies, and pr | rocedures. |
| time, with or without cause of transfer, reassign, promote relationship), with or without | ent with the Company is "at-will," which means that both the Company and I r or prior notice. In addition, the Company may change my position, duties, sche, demote, suspend, or otherwise change the terms and conditions of my t cause or prior notice. I further understand that no one has any authority to en specified time period, or to make any agreement contrary to the foregoing un | nedule, and/or compensation, and ma remployment (other than the at-winter into an agreement of employmen |
| Signature of Applicant: _ | | Date:// |
| Print Name: | | |