

SAMPLE JOB APPLICATION

PLEASE NOTE: It is important that you complete all parts of the application. If your application is incomplete or does not clearly show the experience and/or training required, your application may not be accepted. If you have no information to enter in a section, please write N/A.

| Name and Address | | | | | | | |
|--|-------------------------------|---|-------------------------------|---|-------------------------------|---|--|
| Name (First, MI, Last) Juan Abdiel Ramirez Cruz | | | | Social Security Number 386-37-3978 | | | |
| Mailing Address PO Box 1325 | | | | | | | |
| City, State, and Zip Code Huron, CA 93234 | | | | | | | |
| Telephone (559) - 482-4049 | | | | Alternate Phone (559) - 210-1708 | | | |
| If under 18, please list age 17 | | | | Email juanramirezacruz2007@gmail.com | | | |
| Job Type | | | | | | | |
| Days/hours available to work | | | | | | | |
| <input checked="" type="checkbox"/> I have no preference. | <input type="checkbox"/> Mon. | <input type="checkbox"/> Tues. | <input type="checkbox"/> Wed. | <input type="checkbox"/> Thurs. | <input type="checkbox"/> Fri. | <input type="checkbox"/> Sat. | <input type="checkbox"/> Sun. |
| I am seeking a: | | <input checked="" type="checkbox"/> Full-time job | | <input type="checkbox"/> Part-time job | | <input type="checkbox"/> Full- or Part-time | |
| How many hours can you work weekly? 40 | | | | Can you work nights? Yes | | Date available to begin ASAP | |
| Additional Information | | | | | | | |
| Have you ever been employed by this organization in the past? | | | | | | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| I certify that I am a U.S. citizen, permanent resident, or a foreign national with authorization to work in the United States. | | | | | | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Have you ever been convicted of, or entered a plea of guilty, no contest, or had a withheld judgment to a felony? | | | | | | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| If Yes, please explain: | | | | | | | |
| Do you have a driver's license? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | Driver's license number W1712712 | | Issued in what state? CA | |
| Have you had any accidents during the past three years? No | | | | | | How many? | |
| Have you had any moving violations during the past three years? No | | | | | | How many? | |

| Education | | | | |
|---|-------------------------------------|--|----------------|-------------------|
| School | Location (mailing address) | Years Completed | Major | Degree or Diploma |
| High School | | | | |
| Coalinga High School | 750 Van Ness St, Coalinga, CA 93210 | 4 | N/A | Diploma |
| | | | | |
| | | | | |
| | | | | |
| College or Business/Trade School | | | | |
| Coalinga College | 300 W Cherry Ln, Coalinga, CA 93210 | 1 | N/A | AA Degree |
| | | | | |
| | | | | |
| | | | | |
| Military | | | | |
| Have you even been in the Armed Forces? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | Date entered | |
| Are you now a member of the National Guard? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | Discharge date | |
| Specialty | | | | |

Work Experience

Please list ALL work experience beginning with your most recent job held. Attach additional sheets if necessary.

| | | |
|---|---|----------------------------------|
| Company Harris Farms Boys and Girls Club | Name of last supervisor Gustavo Gonzalez | Hrs/week 10 |
| Address 36612 Central Ave | Start Date 10/17/2023 | Starting Salary \$135/2 weeks |
| City, State, and Zip Code Huron, CA 93234 | End Date 10/26/2023 | Final Salary \$135/2 weeks |
| Phone number (559) 763-6140 | Your last job title Student Worker | |
| Reason for leaving (be specific) Temporary | | |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. Cleaning and making sure the kids have a good experience. | | |
| May we contact this employer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |

| | | |
|--|------------------------------------|-------------------------------|
| Company CHUSD | Name of last supervisor Maria | Hrs/week 40 |
| Address 36131 N St. | Start Date 07-13-23 | Starting Salary \$15.50/hr |
| City, State, and Zip Code Huron, CA 93234 | End Date 08-15-23 | Final Salary \$15.50/hr |
| Phone number (559) - 935 - 7520 | Your last job title Maintenance | |
| Reason for leaving (be specific) Part-time summer job (temporary) | | |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. Maintenance, cleaning, building school equipment, and preparing for the new school year. | | |
| May we contact this employer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |

Work Experience (continued)

| | | | |
|--|------------------------------------|-------------------------------|----------------|
| Company CHUSD | Name of last supervisor Maria | | Hrs/week 40 |
| Address 36131 N St. | Start Date 06-10-24 | Starting Salary \$16.50/hr | |
| City, State, and Zip Code Huron, CA 93234 | End Date 07-12-24 | Final Salary \$16.50/hr | |
| Phone number (559) - 935 - 7520 | Your last job title Maintenance | | |

Reason for leaving (be specific)
 Part-time summer job (temporary)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Maintenance, cleaning, building school equipment, and preparing for the new school year.

May we contact this employer? ☒ Yes ☐ No

References

Please include name, phone number, and circumstances of your acquaintance. Exclude relatives and former employers.

| | | |
|-----------------|--------------------|---|
| 1. Mr. Chagoyan | (559) - 935 - 7520 | Technology Pathway Teacher |
| 2. Mr. Gonzales | (559) - 935 - 7520 | Wrestling Coach/9th Grade Success Teacher |
| 3. Mrs. Moreno | (559) - 935 - 7520 | Math Teacher |
| 4. Mrs. Medina | (559) - 935 - 7520 | High School Counselor |

I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that, should this application contain any false or misleading information, my application may be rejected or my employment with this company terminated.

| | |
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| Signature  | Date 05-07-25 |
|--|------------------|