Employment Application

NatureBridge 28 Geary St., Suite 650 San Francisco, CA 94108



Phone: 415.992.4700; Fax: 415.992.4711

An Equal Opportunity Employer Campus Desired **Please Print** Today's Date Last Name First Name Middle Present Address Address & Street City State Zip Permanent Address (if different from present address) Address & Street State E-mail **Employment Desired:** How were you referred to NatureBridge? **Personal Information** Have you ever applied for work at NatureBridge? ☐ Yes ☐ No If yes, were you hired? Yes No If yes, when? If yes, name(s): and relationship(s): Are you at least 18 years old? Yes No If hired, could you present evidence of your U.S. citizenship or proof of your legal right to live Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? If no, describe the function(s) that cannot be performed. (Note: We comply with the Americans with Disabilities Act and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination and to skill and agility tests.) If yes, state nature of the crime(s), when and where convicted and case disposition.

Emplo	yment Applicati	on		N	ame:			
Education	and Training							
School	Name	City, State		No. of Years Completed	Did you Graduate?	Subject/N	Major Degre	e, Diplon
High					Yes No)		
School	Name	City, State	e				Diplor	na or GE
College/ University	Name	City, State			Yes No			
•	Name	City, State	e					
ocational/ Business	Name	City, State	e		∐ Yes ∐ No			
Employm	ent History							
	present and past employnment. Please complete this				er (up to 10 ye	ears). Acc	ount for all pe	eriods of
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urrent Or m	ost Recent Employer					Telephone	e No.	
Type of Busi	ness	<u> </u>	Name and Title	of Supervisor				
				· · · · · · · · · · · · · · · · · · ·				
Address & St			City			State	Zip	
Dates of Emp	bloyment: From; Month/Year	To; Month/Year	Pay: Sta	rting	Ending	,		
Position and	Duties:							
Reason for L	eaving:		· · · · · · · · · · · · · · · · · · ·					
	ntact this employer for a refer							
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Previous Emp	ployer		 			Telephone	e No.	
Type of Busi	ness	1	Name and Title	of Supervisor				
Address & St	treet		City			State	Zip	
	ployment:	To: Month/Year	Pay:	rting	Ending			
Dates of Emp	From; Month/Year	10, 1110111111 1 041		-	2			
Dates of Emp								
	From; Month/Year Duties:							

Employment Application

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Employment History Continued

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Previous Employer			Telephone	No.
Type of Business		ame and Title of Supervisor		
Type of Business	11/	ame and Thie of Supervisor		
Address & Street		City	State	Zip
Dates of Employment:		Pay:		
From; Month	Year To; Month/Year	Starting	Ending	
Position and Duties:				
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Reason for Leaving:				
May we contact this employer for a	a reference? Yes No)		
			()	
Previous Employer				No. –
Type of Business	N	ame and Title of Supervisor		
Address & Street		City	State	Zip
		•	State	Zīp
Dates of Employment: From; Month/	/Year To; Month/Year	Pay: Starting	Ending	
Position and Duties:				
Reason for Leaving:				
May we contact this employer for a				
Thay we contact this employer for t	reference. E res E re	,		
List any other experience, skills	s or other qualifications in	ncluding military servic	e or hobbies, which you	believe should be
considered in evaluating your q	=		, ,	
				
References				
List below three persons not rel	ated to you who have kno	owledge of your work p	performance within the l	ast three years.
			 	
Name	Company/Title	Telephone No.	Relationship	No. of Years Known
Name	Company/Title	Telephone No.	Relationship	No. of Years Known
Nama	Company/Title	Talanhana Na	Palationship	Vagra V novem
Name	Company/Title	Telephone No.	Relationship	Years Known

Employment Application Name: Please Read Carefully, Initial Each Paragraph and Sign Below I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I Initials further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. I hereby authorize NatureBridge to thoroughly investigate my references, word record, education, and other matters related to my suitability for employment, including but not limited to a criminal background Initials check, and, further, authorize the references I have listed to disclose to NatureBridge any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release NatureBridge, my former employers and all other persons, corporations, partnerships, and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. I understand that nothing contained in the application, or conveyed during any interview which may Initials be granted or during my employment, if hired, is intended to create an employment contract between me and NatureBridge. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or NatureBridge, and that no promises or representations contrary to the foregoing are binding on NatureBridge unless made in writing and signed by me and the President/CEO of NatureBridge. Should a search of public records (including records documenting an arrest, indictment, conviction, Initials civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by NatureBridge, I am entitled to copies of any such public records obtained by NatureBridge unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below. I waive receipt of a copy of any public record described in the paragraph above.

Date

Applicant's Signature