11052 Independence Avenue Chatsworth, CA 91311 (818) 882-8121 • FAX (818) 882-0697

#### APPLICATION FOR EMPLOYMENT

(Please print or type)

Position Applying For						
First Name	Last Name	e		Phone ()		
Address		Ci	ty	State	Zip	
Driver's License #	Class	Ехр	<del></del> -			
Email						
Do you meet the minimum	age requirement for	the position	on you are a	applying?		Yes
						No
If you are under the age of	18, can you provide	a valid wo	ork permit up	pon employment?		Yes
N/A						No
If hired, can you present legal proof of your right to work in the United States?						Yes
						No
Please list any courses, lea working with children that y applying:						

#### **EDUCATIONAL BACKGROUND**

NAME OF SCHOOL & LOCATION (High School, College/University)	Number of Years Completed	MAJOR STUDIES		DEGREE(S) EARNED
Credential Information				
<b>EMPLOYMENT HISTORY:</b> Please I pages if necessary. Start with the m				
DATES	EMPLOYER - CON	ADANIV NIAME	SI IE	PERVISOR'S NAME
DATES	EMPLOTER - COM	AFAINT INAIVIE	301	PERVISOR 3 NAIVIE
JOB TITLE	ADDRESS &	PHONE	REASON FOR LEAVING	
005 11122	718811288 Q	THORE	REASON FOR ELAVING	
	•	•		
DATES	EMPLOYER - CON	JPANY NAME	SUF	PERVISOR'S NAME
JOB TITLE	ADDRESS &	PHONE	REA	SON FOR LEAVING
DATES	EMPLOYER - CON	JPANY NAME	SUF	PERVISOR'S NAME
JOB TITLE	ADDRESS &	PHONE	REA	SON FOR LEAVING
DATES	EMPLOYER - CON	JPANY NAME	SUF	PERVISOR'S NAME
JOB TITLE	ADDRESS &	PHONE	REA	SON FOR LEAVING
Have you ever been asked to resign	from a position? If yes	s, why?		

ls t	here anyone you prefer we	e do not contact during the backg	round investigation? If yes,	why?	
		Please list names and addresse illity. These references must be r		knowledge of your	
	NAME	ADDRESS	PHONE NUMBER (include area code)	RELATIONSHIP	
1					
2					
3					
cha furi any em reg	I hereby certify that I had ances for employment and ther certify that I, the underly omission or misstatement aployment shall be grounds gardless of the time elapsed I understand that it is C	California State Law that all emplo background check and the result	nformation that might adverse true and correct to the besty completed this application on or on any document used refor immediate discharge if	t of my knowledge. I I understand that to secure I am employed, with minors be	
I understand that nothing contained in the application, or conveyed during any interview which may be granted, is intended to create an employment contract between me and Sierra Canyon. In addition, I understand and agree that if I am employed, my employment is "at will" meaning it will be 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 Sierra Canyon, and that no promises or representations contrary to the foregoing are binding on Sierra Canyon unless made in writing and signed by me and Sierra Canyon's designated representative.					
Ар	plicant's Signature		Date		

Sierra Canyon is an Equal Opportunity Employer and does not discriminate against anyone on the basis of race, color, gender, creed, national origin, marital status, age (age 40 and over), national origin or ancestry, physical or mental disability, genetic information, sexual orientation, gender identity, or any other characteristic protected by federal, state, or local laws.

#### **Waiver and Release of Information**

l,	_ (print name), hereby request, authorize and consent to the release of
information to Sierra Canyon So	chool ("School") regarding my previous and/or current employment with
(name of c	urrent or former employer) for the purpose of evaluating my suitability for
employment. I further authorize	(name of current or former employer) or its agent to
respond to any verbal or written	request regarding my employment record, including but not limited to:
positions held; dates of employi	ment; beginning and end pay rates; work performance; disciplinary records,
including any records which we	re sealed as part of a settlement; reliability and any incidents of dishonesty;
insubordination, violence and/or	unsafe behavior; harmful or threatening behavior, including information based
upon materials in my personnel	file. I direct (name of current or former employer) or its
agents to release such informat	ion regardless of any agreement, instructions or representations I may have
previously made with	(name of current or former employer) to the contrary. I further
authorize(	name of current or former employer) or its agents to answer whether it would
rehire me.	
In addition, I authorize _	(name of current or former employer) to release the
contents of and/or to provide a	photocopy of my entire personnel file with the School, if requested by Sierra
Canyon School , including any	documents sealed pursuant to any settlement agreement or stipulation, and all
application information including	questionnaires, interviews, and education transcripts. I further authorize the
disclosure of all records to whic	h, as an employee, I would have or did have access under Labor Code section
1198.5.	
I have received a copy of	of this Waiver and Release and had adequate time to review it. I understand the
meaning and purpose of this W	aiver and Release, and by signing this document, I release
(name of current or former emp	loyer) including its officers, employees, or related personnel both individually
and collectively, from any and a	Il liability for damage of whatever kind, which may at any time result to me, my
heirs, and family associates bed	cause of this Waiver and Release or any attempt to comply with it. Specifically,
(name of c	urrent or former employer) will not be subject to any civil liability for any
relevant cause of action by virtu	e of releasing information identified above in compliance with California Civil
Code Section 47 as amended.	
This Waiver and Releas	e will expire one year after the date signed. A photocopy of this Waiver and

Release is to be considered as valid as an original.

Signature:	 Date:	