

APPLICATION FOR EMPLOYMENT

Please PRINT CLEARLY

Answer All Questions. Résumés are not a substitute for a completed application.

We are an Equal Opportunity Employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, color, religion, sex, sexual orientation, gender identity, gender expression, national origin, ancestry, age, physical or mental disability, medical condition, genetic information, marital status, military or veteran status, or any other category protected by applicable federal, state, or local laws.

SEEK EDUCATION, INC. IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT, REGARDLESS OF ANY PROVISION IN THIS APPLICATION OR OTHER COMPANY DOCUMENTS, IF HIRED, SEEK EDUCATION, INC. OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING CONTAINED IN THIS APPLICATION OR ANY OTHER COMPANY DOCUMENT CREATES A CONTRACT OF EMPLOYMENT.

Applicant Name			
Present Address(Street, Apartment, or Unit Num	aber) City	State	Zip
-	Cellular Telephone Number (
Email Address:			
Are you legally eligible to work in the United States?	If hired, can you provide proof of you	ur legal right to work in	the U.S.?
Yes No	Yes No		
Have you previously applied for employment the compa	any? Yes No If yes, when and whe	re did you apply?	
Have you ever been employed by the company? Yes	s No No		
If yes, provide dates of employment and reason for sepa	ration from employment		
Were you referred by a SEEK employee? Yes N	To If yes, please provide name(s)		
How did you find out about us?	ob Fair Company Website Ot	her	
EMPLOYMENT DESIRED			
Position applied for (check one):			
Behavior Technician	Clinical Supervisor Behavior An	alyst	
Administrative	OTHER		
Are you available to work: Full-time	Part-time Temporary Date available	to start:	
Are you willing to work overtime if required?	Are you willing to work on weekends? Are	e you willing to travel?	
☐ Yes ☐ No	Yes No	☐ Yes ☐ No	



EDUCATION

Education	School Name and Location (City & State)	Course of Study or Major	Years Completed	Diploma/Degree
High School				
College				
Graduate/Professional				
Trade or Correspondence				

EMPLOYMENT HISTORY				
Starting with your most recent job, list your employment history for the past 5 years or your last 3 employers.				
Check if you do not have any previous employment experience.				
Employer Name:				
Address:				
ob Title:	Dates Employed: From	_ To		
Reason for Leaving:				
May we contact this employer? Yes No				
Employer Name:				
Address:				
ob Title:	Dates Employed: From	_ To		
Reason for Leaving:				
May we contact this employer?				
Employer Name:				
Address:				
ob Title:	Dates Employed: From			
Reason for Leaving:				
May we contact this employer? Yes No				



FOREIGN LANGUAGES			
Do you speak any foreign langua	ages? Yes No		
Mandarin Chines	se/Cantonese	Spanish Other:	
Can you read in these languages?	? Yes No		
Can you write in these languages	? Yes No		
LEGAL INFORMATION			
	re-employment Department of Justice Fin nan the name you are currently using whi		No ous employer? Yes No
If yes, please list name(s) you use	ed:		
Have you ever been terminated of	or asked to resign from any job?		
If yes, please explain:			
Have you ever been convicted of	a crime? (Exclude minor traffic violation	ns and convictions that have been s	ealed, expunged, or legally eradicated.)
Yes No If yes,	, please explain:		
REFERENCES			
	s. We need all columns completed.		
This can be supervisors/manager	s from: previous jobs, volunteering exper	riences, and/or internships. Or teac	hers/professors, sports coach, church
pastor, etc.			
NAME	EMAIL	TELEPHONE NUMBER	COMPANY

ACKNOWLEDGMENT AND AUTHORIZATION

By signing below, I acknowledge and agree to the following terms, which comply with current California laws.

1. Employment At-Will Acknowledgment

This Company is an at-will employer as allowed by applicable state law. This means that regardless of any provision in this application, if hired, the Company or I may terminate the employment relationship at any time, for any reason, with or without cause or notice.

- Nothing in this application, or in any document or statement, written or oral, shall limit the right to terminate employment at-will.
- No officer, employee, or representative of the Company is authorized to enter into an agreement—express or implied—with me or any
 applicant for employment for a specified period of time unless such an agreement is in a written contract signed by the President of the
 Company.
- If hired, I agree to conform to the rules and regulations of the Company, and I understand that the Company has complete discretion to modify such rules and regulations at any time, except that it will not modify its policy of employment at-will.



2. Company Property and Personal Property Investigations

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of Company property, including, but not limited to, files, lockers, desks, vehicles, and computers. In certain circumstances, this may also extend to my personal property while on Company premises or when used in connection with Company business.

3. Confidentiality and Conflict of Interest

I understand and agree that, as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign additional agreements, including but not limited to confidentiality, restrictive covenant, and/or conflict of interest statements.

4. Accuracy of Information Provided

I certify that all the information I have provided on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge.

 I understand that any falsification, misrepresentation, or omission of information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate termination.

5. Authorization for Verification of Information

I authorize the Company or its agents to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking to the extent permitted by federal, state, or local law.

- I agree to complete any requisite authorization forms for background investigations, which may be permitted by federal, state, and/or local law.
- If applicable and allowed by law, I will receive separate written notification regarding the Company's intent to obtain "consumer reports."
- I authorize and consent, without reservation, to any party or agency contacted by the Company to furnish the requested information.
- I release, discharge, and hold harmless the Company, its representatives, and any party delivering information from any liability, claims, or
 causes of action arising from the disclosure of such information.

If hired, I authorize the Company to provide truthful information concerning my employment to future employers and hold the Company harmless for providing such information.

6. Eligibility to Work in the United States

If hired, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States. I also understand this Company employs only individuals who are legally eligible to work in the United States.

7. Application Validity

This application will be considered active for a maximum of sixty (60) days. If I wish to be considered for employment after that time, I must reapply.

Certification and Acknowledgment

I certify that all the information I have provided on this application is true, accurate, and complete. I understand and agree that by signing below, I have read and acknowledged all the terms listed above.

Applicant Signature _	Date



WORK AVAILABILITY

Employee Name:			Date:	
	ability Instructions: ay, select your availabilit	y:		
8:30 IUnavSpeci	PM). ailable: You are not avai	ilable to work specific time r	range (e.g., 9:00 AM - 5:00 PM)	
Day	Open Availability (7:30 AM - 8:30 PM)	Unavailable	Specify Hours (Start - End)	Day Off? (✔)
Monday	☐ Yes	□ Yes		
Tuesday	□ Yes	□ Yes		
Wednesday	□ Yes	□ Yes		
Thursday	□ Yes	□ Yes		
Friday	□ Yes	□ Yes		
Saturday	□ Yes	□ Yes		
Sunday	□ Yes	□ Yes		
Personal Info	ormation			
Home Addro	ess:			
Contact Nur	mber:			
	evel (Check One):	ege Units 🔲	Associate's Degree (AA/AS)	
☐ Bachelor's	s Degree (BA/BS)	☐ Master's Deg	gree (MA/MS)	



Preferred M	laximum Weel	kly Hours (Ch	eck One):		
□ 20 hours	□ 25 hours	□ 30 hours	□ 35 hours		
Mileage Ran	nge Willing to	Travel (Check	One):		
□ 20 miles	☐ 25 miles	□ 30 miles	□ Open Mileage		
Languages Spoken Fluently:					
Acknowledgment: I understand that my availability and preferences are subject to review and approval by management. I will promptly communicate any changes to my availability.					
Signature: _					
Date:					