



1382 Locust Street
Pasadena, CA 91106
(626) 577-4477

APPLICATION FOR EMPLOYMENT

Personal:

Please complete **each** section (including employment experience), **even if a resume** is attached.

Last name:	First:	Middle:	Date:
Street Address:	Home phone:	Business phone:	
City:	State:	Zip:	
Social Security No.:	Position desired:	Pay expected:	
Apart from absence for religious observances, are you available for full-time work? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you legally eligible for employment in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>	When will you be available to begin work? _____	
Other special training or skills (Language, machine operation, etc.):			

Education:

Name and Location of School	No. of Years completed	Course of Study	Degree or Diploma
College:			Yes <input type="checkbox"/> No <input type="checkbox"/>
High School:		N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Elementary:		N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other:			

Employment Experience:

Please start with your present or last job. Include any job-related military service assignments and volunteer activities. If you need additional space, please continue on a separate sheet of paper.

Employer:	Dates Employed - From:	To:
Address:	Telephone No.:	
Job Title:	Hourly rate/salary:	Supervisor:
Job Responsibilities:		

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We may contact the employers listed on the preceding page, **unless** you indicate those you do **not** want us to contact.

Do not contact:
Employers name:
Reason:

References:

Please provide name, address and telephone number of three references that are not related to you and not previous employers.

1.
2.
3.

Information

Are you 18 years of age or older and if hired can you provide proof of your age? __Yes __No

Have you filed an application here before? __Yes __No If yes, when? _____

Are you related to a current or former ACTS employee? __Yes __No If yes, please provide the following:

Name: _____ Dept: _____ Relationship: _____

Have you ever been convicted of a crime other than a traffic violation? __Yes __No If yes, explain and state the charge, the court, the date of the conviction:

(NOTE: Please exclude misdemeanor convictions for marijuana-related offenses more than two years old; convictions that have been sealed, expunged, or legally eradicated; and misdemeanor convictions for which probation was successfully completed or otherwise discharged and the case was judicially dismissed. A conviction is not an automatic bar to employment. Each case will be considered on its own merits.)

Are you prevented to lawfully becoming employed in this country because of visa or immigration status? *(Proof of citizenship or immigration status will be required upon employment).* __Yes __No

Are you a veteran of the United States military? __Yes __No If yes, please state branch of service: _____

Do you have any physical or mental condition that prevents you from performing any of the essential functions of the position for which you are applying with or without accommodation? __Yes __No

Statement of Applicant's Christian Faith:

Because All-Out Caring Thrift Store (ACTS) is committed to Christian service, we are concerned that our employees also be committed to this perspective. When an individual begins employment, he/she is expected to sign a Service Covenant, which is a statement of Christian faith and a pledge to accept the responsibility of serving Christ at ACTS Thrift Store. Part of this responsibility includes a commitment to live a lifestyle consistent with the values of The ACTS Thrift Store and the principles contained in The Bible.

Please take a moment to answer the following questions, which will help us evaluate our compatibility. We appreciate and thank you for sharing your thoughts with us.

Are you currently attending church? Yes No

If yes, what is the name of your church? _____

What is your Pastor's name? _____

In what ways are you involved in your church and/or other Christian organizations:

Please write a brief statement of your Christian Testimony and Experience.

Employment At-Will

Employment at ACTS Thrift Store is at-will. This means that employment is with the mutual consent of you and ACTS Thrift Store. Consequently, both you and ACTS Thrift Store have the right to terminate the employment relationship for any reason, with or without cause, and with or without notice at any time at the option of you or ACTS Thrift Store.

Neither this document nor any statement or conduct by ACTS Thrift Store or its employees shall limit the right of ACTS Thrift Store to terminate employment at-will. Other than as stated below, no employee of ACTS Thrift Store has any authority to enter into an agreement, express or implied, for employment for any specified period of time or to make an agreement for employment other than at-will.

Consistent with this policy of at-will employment, compensation increases, compensation decreases, discipline, promotions, demotions, and changes in job responsibilities are solely within the discretion of ACTS Thrift Store. Thus, ACTS Thrift Store may increase or decrease your salary, hourly wage or other compensation at any time. ACTS Thrift Store may also discipline, promote, demote or reassign you at any time, as ACTS Thrift Store sees fit in its sole discretion.

Changes in compensation, promotions, demotions and/or job responsibilities do not affect ACTS Thrift Store's right to terminate your employment at-will. ACTS Thrift Store reserves the right to discipline, promote, demote, reassign job responsibilities or change the pay of its employees at any time, with or without advance notice, at its sole discretion.

Although other policies and procedures may change from time to time, this basic employment "at-will" agreement will remain in effect throughout your employment with ACTS Thrift Store.

Agreement to Arbitrate Disputes

Any and all disputes between you and ACTS Thrift Store that arise out of your employment with ACTS Thrift Store, including disputes involving the terms of this document, shall be resolved through final and binding arbitration. This shall include, without limitation, disputes relating to this document, your employment by ACTS Thrift Store or the termination thereof, claims for breach of contract or breach of the covenant of good faith and fair dealing, wage disputes, and any claims of discrimination or other claims under Title VII of the Civil Rights Act of 1964, the Age Discrimination in Employment Act, the Americans With Disabilities Act, the California Fair Employment and Housing Act, or any other federal, state or local law or regulation now in existence or hereinafter enacted and as amended from time to time concerning in any way the subject of your employment with ACTS Thrift Store or your termination. The only claims not covered by this Arbitration Agreement are claims for benefits under the workers' compensation or unemployment insurance laws, which will be resolved pursuant to those laws. Notices of requests to arbitrate a covered claim must be made within the applicable statute of limitations. Binding arbitration will be conducted in Los Angeles County, California in accordance with the rules and regulations of the American Arbitration Association ("AAA"). Discovery may be carried out under the supervision of the arbitrator appointed pursuant to the rules of the AAA. You will be responsible for paying the same fee to initiate the arbitration that you would pay to file a civil lawsuit.

ACTS Thrift Store will pay any remaining cost of the arbitration filing and hearing fees, including the cost of the arbitrator. Each side will bear its own attorneys' fees, that is, the arbitrator will not have authority to award attorneys' fees unless a statutory section at issue in the dispute authorizes the award of attorneys' fees to the prevailing party, in which case the arbitrator has authority to make such award as permitted by the statute in question. You understand and agree that the arbitration shall be instead of any civil litigation and that this means that you are waiving any right you may have to a jury trial as to such claims. The parties further understand and agree that the arbitrator will issue a written decision and that the arbitrator's decision shall be final and binding to the fullest extent permitted by law and enforceable by any court having jurisdiction.

Signature below applies to our Employment At-Will and Agreement to Arbitrate Disputes sections above:

Signature: _____ Date: _____

Certification

The information provided in this application for employment is true, correct and complete. If employed, any misstatement, omission, or falsification of facts on this application, may result in my dismissal.

Signature: _____ Date: _____

If you decide to engage an investigative consumer-reporting agency to report on my credit and personal history, I authorize you to do so. If a report is obtained you must provide, at my request, the name and address of the agency, so that I may obtain from them the name and substance of the information contained in the report.

Signature: _____ Date: _____

All-out Caring Inc. dba ACTS Thrift Store does not discriminate on the basis of race, religion, color, national origin, gender, age, disability, status as a veteran, or other characteristics protected by law in its programs, policies, or procedures.



**DRUG/ALCOHOL TESTING
CONSENT AND RELEASE FORM**

If requested I hereby consent to submit to a drug or alcohol test and to furnish a sample of my urine, breath, and/or blood for analysis, as shall be determined by **ACTS Thrift Store** in order to meet with their policy regarding the selection of applicants for employment if needed or required by the Company. We reserve the right to randomized testing when deemed needed by the company

I further authorize and give full permission to have the Company and/or its authorized agents and physicians to send the specimen or specimens so collected to a laboratory for a screening test for the presence of any prohibited substances under the policy, and for the laboratory or other testing facilities to release any and all documentation relating to such test to the Company. I further agree to and hereby authorize the release of the results of said tests to the Company.

I understand that the use of illegal drugs that would prohibit me from being employed at this Company.

I further agree to hold harmless the Company and its agents and physicians from any liability arising in whole or part, out of the collection of specimens, testing, and use of the information from said testing in connection with the Company's consideration of my application or status of employment.

I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

APPLICANT:

Print Name: _____ ID. #: _____

Signature: _____ Date: _____