



7101 McNeil Ln
Buena Park, CA 90620
888-766-7433

EMPLOYMENT APPLICATION

United Limousine & Charter, Inc. (the "Company") is an Equal Opportunity Employer and does not unlawfully discriminate in its employment practices. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on any basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Company.

CONTACT INFORMATION

(Please Print)

Full Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Alternate Phone: _____

For which position are you applying for? _____

How did you hear about this job? _____

Are you authorized to work in the United States? Yes No

Your employment will be conditional upon the Company's receipt of proper documentation indicating your eligibility to work in the United States.

Can you submit proof of your legal employment authorization and identity? Yes No

Are you able to work weekends and flexible hours as the job requires? Yes No

I. EDUCATION

High School:

Name: _____

Location: _____

Did you graduate? Yes No

Vocational/Trade School:

Name: _____

Location: _____

Did you graduate? Yes No

Degree/Emphasis of Study: _____

College/University:

Name: _____

Location: _____

Did you graduate? Yes No

Major and Degree: _____

Other:

Name: _____

Location: _____

Did you graduate? Yes No

Degree/Emphasis of Study: _____

Do you have a commercial driver license? Yes No

Type of License: _____

Issuing State: _____

Valid Until: _____

Endorsements: _____

II. WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with the most recent employer listed first. Account for all periods of time, including any period(s) of unemployment. You may include any verifiable work performed on a volunteer basis, internships, or military service.

Your failure to completely respond to each inquiry, or to falsify, misrepresent, or omit any material information, may disqualify you from consideration of employment. In addition, if a falsification, misrepresentation, or material omission is discovered at any time while you are employed at the Company, your employment may be terminated.

1. Current or Most Recent Employer

Employer Name: _____

Employer Address: _____

Type of Business: _____

Telephone #: _____

Dates Employed: From ____ / ____ / ____ To ____ / ____ / ____

Job Title: _____

Duties: _____

Supervisor's Name: _____

May we contact your Supervisor? Yes No

If No, why not? _____

Reason for Leaving: _____

2. Employer

Employer Name: _____

Employer Address: _____

Type of Business: _____

Telephone #: _____

Dates Employed: From ____ / ____ / ____ To ____ / ____ / ____

Job Title: _____

Duties: _____

Supervisor's Name: _____

May we contact your Supervisor? Yes No

If No, why not? _____

How much notice did you give when resigning? If none, explain.

3.

Have you ever been terminated from any job? Yes No

If you answered "Yes", please explain the circumstances of each occasion.

III. REFERENCES

Please list the name of three (3) professional references from school, volunteer services, or prior employment.

NAME	POSITION	COMPANY	RELATIONSHIP	PHONE #

V. ADDITIONAL INFORMATION

If the position you are applying for requires a valid driver's license, please answer the following:

Do you have a valid Driver's License? Yes No

License #: _____ Class: _____ State: _____

Restrictions: _____

Have you ever been convicted by any court of a felony? Yes No

(Do not include misdemeanor marijuana-related convictions that are more than two (2) years old, or misdemeanor convictions for which probation was successfully completed or otherwise discharged and the case was judicially dismissed. Do not include information concerning an arrest or detention that did not result in a conviction. Also, do not include any convictions that have been sealed, expunged, or statutorily eradicated.) A "Yes" answer may not necessarily disqualify an applicant from a position.

If "Yes", please explain the circumstances and current status of your conviction:

AUTHORIZATIONS AND ACKNOWLEDGEMENT

Investigation Authorization. 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, and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

Initials

Non-Discrimination and Reasonable Accommodation Policy. I understand that it is the policy of the Company not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the Americans with Disabilities Act (ADA). I will inform the Company in the event I need reasonable accommodation due to a disability recognized by the ADA.

Initials

Valid Driver's License and Insurance Required. I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent upon my possession of a valid driver's license and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

Initials

Drug and Alcohol Policy. I understand that the Company may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the Company, pursuant to the Company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or controlled drugs during the course of my employment at the Company. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local law.

Initials

Accuracy of Information Provided. I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview with the Company, is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any material information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate termination of my employment.

Initials

Release from Liability. I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

Initials

Proof of Employment Eligibility. If hired by the Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company within three (3) days of hire. I also understand this Company employs only individuals who are legally eligible to work in the United States for this Company. Failure to submit such proof within the required time shall result in immediate termination of employment. If I am hired by the Company, and am not a United States citizen, I will be required to provide genuine documentation of my continued eligibility to work in the United States.

Initials

I UNDERSTAND THAT NEITHER THIS APPLICATION, NOR ANY COMMUNICATION BY A COMPANY MANAGEMENT REPRESENTATIVE, IS INTENDED TO CREATE OR DOES CREATE A CONTRACT OF EMPLOYMENT, OFFER, OR PROMISE OF EMPLOYMENT FOR A DEFINITE TERM. I ACKNOWLEDGE THAT IF HIRED BY THE COMPANY, EMPLOYMENT IS ON AN **AT-WILL** BASIS IN ACCORDANCE WITH STATE LAW. THIS MEANS THE COMPANY IS FREE TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE OR ADVANCE NOTICE.

IN ACCORDANCE WITH STATE LAW, MY ACCEPTANCE OF EMPLOYMENT IS NOT A CONTRACT OF EMPLOYMENT FOR ANY SPECIFIED TIME. SIMILARLY, I AM FREE TO TERMINATE MY EMPLOYMENT WITH THE COMPANY AT ANY TIME FOR ANY REASON. THIS **AT-WILL** PROVISION MAY BE MODIFIED OR WAIVED ONLY IN A WRITTEN AGREEMENT SIGNED BY AN AUTHORIZED REPRESENTATIVE OF THE COMPANY AND ME. 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 OR ITS ARBITRATION POLICY, IF ANY.

Initials

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.

I REPRESENT AND WARRANT THAT I HAVE READ AND FULLY UNDERSTAND THE FOREGOING, AND THAT I SEEK EMPLOYMENT UNDER THESE CONDITIONS. I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE AND COMPLETE.

Signature of Applicant: _____ Date: _____