

Fuzion Energy
Office of Human Resources \* 12720 Jomani Drive \* Bakersfield, CA \* 9 3 3 1 2 661-282-2170

## **EMPLOYMENT APPLICATION**

Fuzion Energy is an Equal Opportunity Employer.

TYPE or PRINT – Please complete all sections, **EVEN IFA RESUME ISSUBMITTED**.

Date:		Status Desired:	Full-time	Part-time		
Position(s) applied for:						
Location(s):						
PERSONAL DATA:						
First Name:		Middle Initial:	Last Name: _			
Home Street Address:						
City:		State:	Zip cod	e:		
Telephone: ()		Other Contact Number: ()				
Social Security Number:		Birth Date (if under 18):				
Have you ever been emp	loyed by Fuzion Energ	y? YES	NO			
Did you get referred by	someone who works a	t Fuzion? YESN	O If Yes by WI	10?		
		sdemeanor within the last of necessarily disqualify an app		nt) NO		
Have you ever been term	ninated for cause? YES	S NO	(If yes, attach a detaile	d explanation.)		
Do you have any relative	e(s) working for Fuzion	Energy? YES	NO			
Name of relative	e(s):					
Name of School(s) Attended	Last Grade Completed	Curriculum or Major	Did You Graduate?	Diploma/Degree(s) or Hours Completed (Attach a Copy of Diploma/Degree(s)		
Specialized Training/ A	Apprenticeship/ Skills	/ Extra-Curricular Act	ivities:			

ADDITIONAL INFORMATION: (list any other information that you believe contributes to your qualifications for this position)

Can you trav	vel if the job re	quires it? YES NO		
Are you prev	vented by Visa	or Immigration Status from becoming empl	oyed in the United States: YES	SNO
OTHER SKI	LLS: (if applica	able to position, check skills you have knowledge of)		
_ Typing (w	pm <u> </u> ) <u> </u>	_ Adding machine or calculator ()	Shorthand (wpm)	_ Transcription
_ PBX	Word proce	ssing and Spread sheet programs Wor	d Perfect (version)	Lotus/Excel (version)
_ Pagemaker	(version)	Other(s)		
EMPLOYM	ENT RECORD	e: (list most recent first)		
Start Date (month/year)	End Date (month/year)	Employer Address	Job and Major Duties	Reason for Leaving
		Name:	Title:	
		Address:	Duties:	
		City/State/Zip:		
		Telephone: ( )		Immediate Supervisor:
		Salary:		
		Name:	Title:	
		Address:	Duties:	
		City/State/Zip:		
		Telephone: ( )		Immediate Supervisor:
		Salary:		
		Name:	Title:	
		Address:	Duties:	
		City/State/Zip:		
		Telephone: ()		Immediate Supervisor:
		Salary:		
		Name:	Title:	
		Address:	Duties:	
		City/State/Zip:		
		Telephone: ()		Immediate Supervisor:
		Salary:		
	I	<u>l</u>	1	1

Name	Complete Address/City/State	Zip Code	Phone
VERIFICATION OF APPL	LICATION INFORMATION		
incomplete, or omitted inform disqualification for employme Fuzion Energy and its agents suitability for employment. I persons from any claims, liab Fuzion Energy, as well as frothat if I receive a conditional Fuzion Energy. The results o application. If I refuse to take understand that if offered emplegal authority to work in the Energy. I understand that no agreement for any specific tire.	d any information requested on this application on this application or my resume, of ent or, if I am hired, dismissal from emplito confirm information supplied on this a lagree to furnish additional information is pilities and damages that may result from musing such information in considering offer, I may be asked to take a job-related of this examination will be communicated e such a medical examination, I understant ployment I must complete an I-9 form and United States. If employed, I agree to come other than the President or designed the only for written promise or agreement.	or otherwise in the application and my resum frequested. I release all requesting or furnishing my employment applicated medical examination was to Fuzion Energy and conditated in the disquality of provide satisfactory pronform to the policies and is authorized to enter interary to the foregoing. I	cation process will result in discovered. I authorize ne and to investigate my parties, companies, and information about me to tion. I understand with a physical selected by onsidered in evaluating my fied from employment. I roof of my identity and d standards of Fuzion o any employment
APPLICANT'S SIGNATUI	RE	DATE	
CERTIFICATION-CONSE	ENT-ACKNOWLEDGEMENT		
I hereby certify that this application complete to the best of my kn	ication was completed by me and that all nowledge.	entries on it and informa	ation in it are true and
provisions, to the contrary, m or implied, to remain in Fuzion said to me during the Fuzion Fuzion Energy's documents, agreement. In consideration period and that my employments	understand that in the absence of a written by status, if I am hired, will be that of an expensive employ. In this connection, I expensive employee handbook or personnel manual of any employment offered, I specifically ent may be terminated, with or without canned that no unauthorized representative to the foregoing.	employee at will having a expressly acknowledge f ess or during employme constitutes the terms of agree that my employmenuse or notice, at any time	no contractual right, expressive that neither anything one in any provision in an implied employment then is for an indefinite time, at the option of either
APPLICANT'S SIGNATUI	RE	DATE	

Fuzion Energy will maintain this application in an active status for 6 months. If you want to be considered for employment after 6 months from the date of this application, you must complete and submit a new application.