



# Employment Application

An Equal Opportunity Employer

P.O. Box 4050  
 37404 Sierra Highway  
 Palmdale, CA 93590-4050  
 (661) 273-2700

<b>Date Applied</b>  -      -
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PLEASE ANSWER. PRINT ALL ANSWERS YOURSELF. DO NOT TYPEWRITE.

<b>PERSONAL DATA</b>	Last Name		First Name		Middle Initial	
	Street Address			City	State	Zip Code
	Phone Number (    )    -	Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have a relative currently employed by the Antelope Valley Press? <input type="checkbox"/> Yes Name _____ <input type="checkbox"/> No		

<b>EMPLOYMENT INFORMATION</b>	Position(s) Applying for		Employment Desired (check one) <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary		
	If previously employed by us, give dates.		Job Title	Dept	Reason(s) for leaving
	All jobs are available to qualified candidates of either sex. <b>TYPE OF WORK DESIRED</b>		Are you willing to work the following?		Are you able to perform the tasks of the job for which you are applying?
	<input type="checkbox"/> Clerical	<input type="checkbox"/> Indoor	Weekends <input type="checkbox"/> Yes <input type="checkbox"/> No	Holidays <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Typing (wpm)	<input type="checkbox"/> Outdoor	Shifts & Rotation <input type="checkbox"/> Yes <input type="checkbox"/> No	Overtime <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Mechanical	<input type="checkbox"/> Either	If hired, on what date will you be available to start work? _____			
<input type="checkbox"/> Technical	<input type="checkbox"/> Other	Driver's License # _____ State _____ Exp. Date _____			
Convicted of a felony or for convictions that are sealed, expunged or irradiated in the last 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No		Traffic violations in the last 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No			
		Traffic accidents in the last 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No			
		Convicted of driving under the influence of alcohol or drugs? <input type="checkbox"/> Yes <input type="checkbox"/> No			

<b>EDUCATION AND SKILLS</b>	Name of High School	City	State	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Major subjects	
	Name of College	City	State	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Major subjects	Units completed
	Name of College	City	State	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Major subjects	Units completed
	Are you now attending school? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time		What courses are you taking? <input type="checkbox"/> Academic <input type="checkbox"/> Business <input type="checkbox"/> General <input type="checkbox"/> Vocational		List any other courses, studies or training.	
	List any other licenses, skills, vocational training, equipment or machines operated, experience or qualifications which you feel are applicable to employment with the Antelope Valley Press, or helpful to us in our evaluation.					
List other name(s) under which school or employment records are kept:						





**CONSUMER CREDIT AND BACKGROUND CHECK REPORT RELEASE FORM**

BY MY SIGNATURE BELOW I HEREBY give permission to Antelope Valley Press, Inc. and Collard Investigations Internationale, LLC to obtain a Consumer Credit Report and/or Background Check Report on me. This authorization is valid for purposes of verifying information given in connection with my application for employment covered under the Equal Employment Opportunity Act (EEOA), Fair Credit Reporting Act (FCRA), and the Drivers Privacy Protection Act (DPPA). In addition, I understand that Antelope Valley Press, Inc. may conduct additional background checks during my employment if I am hired.

I also hereby authorize all corporations, former employers, supervisors, credit agencies, educational institutions, law enforcement agencies, city, state, county, and federal courts and agencies, military services, and other persons or entities with relevant information about me, to release any and all such information only to Antelope Valley Press, Inc. and Collard Investigations Internationale, LLC and their representatives.

This authorization shall be valid in original or facsimile form. You may contact me personally if you need to further verify and authenticate this request.

Applicant's Name:

\_\_\_\_\_  
Last First Middle Suffix (Sr., Jr., III, etc.)

Other Names Used:

\_\_\_\_\_  
(Maiden, Nickname, etc.) Telephone #: (Area Code) Number

Address:

\_\_\_\_\_  
Street City State Zip

Social Security #

\_\_\_\_\_ Date of Birth: (For Criminal Check Only)

Drivers License #

\_\_\_\_\_ State Issued Expiration Date

Home E-mail Address:

\_\_\_\_\_  
(For Confidential Communication Only)

Applicant's Signature:

\_\_\_\_\_ Date Signed:

Additional Comments: