



APPLICATION FOR EMPLOYMENT

LG Professionals, Inc., is an Equal Opportunity Educational Institution and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status or sexual orientation.

Position Applied For:			Name (Last, First, Middle):			
Street Address:			City, State, ZIP Code:			
Pay Rate Desired:		Home Phone:		Cell Phone:		E-mail Address
Are you eligible to work in the United States?		<input type="checkbox"/> YES	<input type="checkbox"/> NO			
Are you 18 year of age or older?		<input type="checkbox"/> YES	<input type="checkbox"/> NO	Do you have reliable transportation?		
Are you currently employed?		<input type="checkbox"/> YES	<input type="checkbox"/> NO	What is your last job title and department?		
Are you related to any current company employee?		<input type="checkbox"/> YES	<input type="checkbox"/> NO	If YES, what is their name and their relationship to you?		
If required for a position, do you have a valid driver's license?		<input type="checkbox"/> YES	<input type="checkbox"/> NO			
How did you learn about this employment opportunity? Check all that apply:						
<input type="checkbox"/> LG Professionals website / walk-in		<input type="checkbox"/> Cal Jobs		<input type="checkbox"/> Career Builder		
<input type="checkbox"/> Referral:		<input type="checkbox"/> Other:		<input type="checkbox"/> Monster		
EDUCATION						
Name of School	City/State	Did You Graduate?	If No, When will you Graduate?	If Yes, when did you graduate?	Degree received	Major
High School:		<input type="checkbox"/> YES <input type="checkbox"/> NO				
GED:		<input type="checkbox"/> YES <input type="checkbox"/> NO				
Other School:		<input type="checkbox"/> YES <input type="checkbox"/> NO				
College:		<input type="checkbox"/> YES <input type="checkbox"/> NO				
College:		<input type="checkbox"/> YES <input type="checkbox"/> NO				
Other credential, licenses, professional affiliations, etc., which are relevant to the job(s) for which you are applying.						
MILITARY						
Are you a veteran? <input type="checkbox"/> YES <input type="checkbox"/> NO Duty/Specialized skills						

SKILLS: Please list technical skills relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge and note your level of proficiency (basic, intermediate, expert).

WORK EXPERIENCE: Please detail your work history (last two jobs). Begin with your current or most recent employer. **PLEASE DO NOT** complete this form with the notation "See Resume". **NOTE: LG Professionals, Inc.,** reserves the right to contact all current and former employers for reference information.

Dates Employed (Most Recent) From: _____ To: _____	<input type="checkbox"/> Full Time <input type="checkbox"/> Part-time If part-time , how many hours./week?: _____	Title: _____
Starting Salary: _____	Organization Name and Address: _____	
Final Salary: _____		
Supervisor`s Name, Title and Phone Number: _____	Reference Name, Title and Phone Number: _____	Contact my current references: <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate
Primary Duties: _____		Reason for Leaving: _____
Dates Employed (Most Recent) From: _____ To: _____	<input type="checkbox"/> Full Time <input type="checkbox"/> Part-time If part-time , how many hours./week?: _____	Title: _____
Starting Salary: _____	Organization Name and Address: _____	
Final Salary: _____		
Supervisor`s Name, Title and Phone Number: _____	Reference Name, Title and Phone Number: _____	Contact my current references: <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate
Primary Duties: _____		Reason for Leaving: _____
Have you ever been convicted of or pled guilty to a crime which is now a felony?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If YES, please explain: _____
In case of Emergency please contact:		
Name: _____		Relationship: _____
Home Phone: _____		Cell Phone: _____

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize **{LG Professionals, Inc}** to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of **{LG Professionals Inc.}** serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a State security questionnaire and State loyalty oath, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only. If employed on a regular, benefits-eligible basis, I understand that I would be required to make mandatory contributions to the **{LG Professionals, Inc.}**.

Applicant Signature: _____ Date: _____