



Community Resource Project, Inc.
 250 Harris Avenue
 Sacramento, CA 95838

POSITION APPLIED FOR: _____
 RECRUITMENT #: _____

1. You must submit a separate application for each position for which you apply.
2. You must type or print legibly in blue or black pen.
3. You must complete ALL sections of the application. Do not state **SEE RESUME**.
4. Deadline-dated postmarks will NOT be accepted.
5. Mail, fax, email, or bring your application to the Human Resources

EMPLOYMENT APPLICATION

SOCIAL SECURITY NUMBER	LAST NAME	FIRST NAME	M.I.,
ADDRESS		HOME PHONE _____	
		CELL PHONE _____	
CITY	STATE	ZIP CODE	BUSINESS PHONE _____
			EMAIL _____
EMERGENCY CONTACT			EMERGENCY CONTACT PHONE (note home, cell or business)
NAME(S) OF RELATIVE(S) WORKING FOR COMMUNITY RESOURCE PROJECT, INC.			TIME NEEDED BETWEEN OFFER AND EMPLOYMENT
Are you available to work: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Weekends <input type="checkbox"/> Evenings <input type="checkbox"/> Seasonal		Are you over 18 years of age? ... <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted of a CRIME that has not been expunged, sealed, or dismissed? (READ BELOW) <input type="checkbox"/> Yes <input type="checkbox"/> No This includes DUIs, felonies, and misdemeanors that have not been expunged, sealed, or dismissed through formal court procedures. Do not provide information about misdemeanor marijuana convictions more than two years old. Convictions will not necessarily disqualify you from employment. Background checks are conducted on all applicants. Licensed and certain other positions will require Department of Justice clearance. If YES answer, state nature of the crime(s), when and where convicted, and disposition of the case(s).			
Are you currently under arrest for any crime which has not been resolved (i.e., pending trial, etc.)? (Do not provide information about misdemeanor marijuana arrests more than two years old.) <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you used illegal drugs within the past three weeks? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when and which drugs did you use?			
Are you able to perform the duties of the position for which you are applying, including regular attendance? <input type="checkbox"/> Yes <input type="checkbox"/> No (We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applications/employees to perform essential functions. Applicants hired may be subject to passing a medical examination, and skill and agility tests.)			
DRIVER'S LICENSE: State _____ #: _____ Expiration Date: _____ Restrictions or Suspensions?			

Education, Training & Qualifications

CIRCLE THE HIGHEST GRADE COMPLETED 1 2 3 4 5 6 7 8 9 10 11 12 HIGH SCHOOL GRAD OR EQUIV.? Yes No

NAME & LOCATION OF COLLEGE/UNIVERSITY/TRADE & TECH SCHOOL	COURSE OF STUDY	UNITS COMPLETED	QTR	SEM	TYPE OF DEGREE OR DIPLOMA COMPLETED

Credential(s) held, type & expiration date:

Describe any specialized training, apprenticeship, skills or extracurricular activities that are relevant to the job for which you are applying.	
Describe any honors, scholarships, appointments or awards that you have received.	
List professional, trade, business or civic activities and offices held. You may exclude information that would reveal sex, race, religion, national origin, age, ancestry, or disability or other protected personal information.	
State any additional information you feel may be helpful to us in considering your application.	

List any foreign languages you can speak, read, and/or write

	Fluent	Good	Fair
Speak			
Read			
Write			

Personal & Professional References

NAME (At least 3 of the 4 references should be professional references)	Y PROFESSIONAL	Y PERSONAL	PHONE # w/area code

Employment History

Are you currently employed? [] Yes [] No If yes, may we contact your current employer? [] Yes [] No	Have you been discharged or asked to resign from a position or job?[] Yes [] No If yes, explain reasons.
--	---

Explain any gaps in your employment history. Do not provide information about any physical or mental disabilities or other medical information.	
---	--

List below all present and past employment starting with your most recent employer. **You must provide the telephone number of all current and past employers.** You must complete this section even if attaching a resume. **Do not state "See Resume."**

EMPLOYER NAME	YOUR SUPERVISOR'S NAME	PHONE #	TYPE OF BUSINESS
DATES OF EMPLOYMENT: FROM ___/___/___ TO: ___/___/___	Full Time [] Part Time [] Hours Per Week: _____ Salary: _____	REASON FOR LEAVING	
JOB TITLE: _____ DUTIES:			
EMPLOYER NAME	YOUR SUPERVISOR'S NAME	PHONE #	TYPE OF BUSINESS
DATES OF EMPLOYMENT: FROM ___/___/___ TO: ___/___/___	Full Time [] Part Time [] Hours Per Week: _____ Salary: _____	REASON FOR LEAVING	
JOB TITLE: _____ DUTIES:			
EMPLOYER NAME	YOUR SUPERVISOR'S NAME	PHONE #	TYPE OF BUSINESS
DATES OF EMPLOYMENT: FROM ___/___/___ TO: ___/___/___	Full Time [] Part Time [] Hours Per Week: _____ Salary: _____	REASON FOR LEAVING	
JOB TITLE: _____ DUTIES:			
EMPLOYER NAME	YOUR SUPERVISOR'S NAME	PHONE #	TYPE OF BUSINESS
DATES OF EMPLOYMENT: FROM ___/___/___ TO: ___/___/___	Full Time [] Part Time [] Hours Per Week: _____ Salary: _____	REASON FOR LEAVING	
JOB TITLE: _____ DUTIES:			

READ CAREFULLY BEFORE SIGNING.

1. If I am offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the U.S.
2. I understand that, if I am employed, any false statement, misrepresentation, or omission of facts on this application or on any supporting documents, regardless of when discovered to be false or omitted, may result in my immediate dismissal.
3. I understand that I will be required to possess a current and valid California driver's license if my job requires me to drive in the course of my work.
4. I understand that I will be required to maintain the minimum auto insurance as required by California law if I am required to drive and use my own vehicle during the course of my work.
5. Employment at Community Resource Project, Inc. is employment at will. This means that an employee is free to leave his or her employment at any time, with or without cause or notice, and the Company retains the same right to terminate the employee at any time, with or without cause or notice. Please understand that continued employment cannot be guaranteed for any employee.

This policy of at-will employment may be changed only by a written employment agreement signed by the Chief Executive Officer that expressly changes the policy of at-will employment. Unless the employee's employment is covered by a written employment agreement that specifically provides otherwise, this policy of at-will employment is the sole and entire agreement between the employee and the Company as to the duration of employment and the circumstances under which employment may be terminated.

With the exception of employment at-will, terms and conditions of employment with the Company may be modified at the sole discretion of the Company, with or without cause or notice at any time. No implied contract concerning any employment-related decision or term or condition of employment can be established by any other statement, conduct, policy, or practice. Examples of the types of terms and conditions of employment that are within the sole discretion of the Company include, but are not limited to, the following: promotion; demotion; transfers; hiring decisions; compensation; benefits; qualifications; discipline; layoff or recall; rules; hours and schedules; work assignments; job duties and responsibilities; production standards; subcontracting; reduction, cessation, or expansion of operations; sale, relocation, merger, or consolidation of operations; determinations concerning the use of equipment, methods, or facilities; or any other terms and conditions that the Company may determine to be necessary for the safe, efficient, and economic operation of its business.

6. I request, authorize and consent to the release of information to Community Resource Project, Inc. regarding my previous employment and authorize all past employers or agents that they may designate, to respond to verbal or written inquiries from Proteus regarding my employment record, including, but not limited to, positions held, dates of employment, last pay rate, work performance, disciplinary records, reliability, and any incidents of dishonesty, insubordination, violence, and/or unsafe, harmful or threatening behavior, including information based upon materials in my personnel files.
7. I request, authorize and consent to the release of information from any public agency or private entity concerning any professional or vocational license or certification that I have held in the past or currently hold, including, but not limited to, information concerning whether such license or certification is in good standing and any disciplinary or other proceedings concerning such license or certification.
8. I understand that no supervisor or manager may alter or amend the conditions set forth in paragraphs one (1) through seven (7) above. I understand that the foregoing conditions can only be altered or amended by a written agreement signed by the Chief Executive Officer of Community Resource Project, Inc. .

Signature: _____ Date: _____

Print name: _____ List all names used in the past: _____



**Human Resources Department
250 Harris Avenue
Sacramento, CA 95838**

Phone: 916-567-5220

Fax: 916-567-5208

Email: jessicar@cresource.org

AN EQUAL OPPORTUNITY EMPLOYER



Print Name: _____

FAIR CREDIT REPORTING ACT

Release and Authorization

In connection with my application for employment (including contract for service) with Community Resource Project, Inc. I understand that investigative inquiries may be obtained on myself by a consumer reporting agency, and that any such report will be used solely for employment-related purposes. I understand that the nature and scope of this investigation will include a number of sources including, but not limited to, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, general reputation, personal characteristics, mode of living, and work habits. Information relating to my performance and experience, along with reasons for termination and past employment from previous employers, may also be obtained. Further, I understand that you will be requesting information from various Federal, State, County, and other agencies, that maintain records concerning my past activities relating to my driving, credit, criminal, civil, education, and other experiences.

I understand that if the Community Resource Project, Inc. hires me, it may request a consumer report or an investigative consumer report about me for employment-related purposes during the course of my employment. The scope of this investigation will be the same as the scope of a pre-employment investigation, and that the nature of such an investigation will be my continuing suitability for employment, or whether I possess the minimum qualifications necessary for promotion or transfer to another position. I understand that my consent will apply throughout my employment, unless I revoke or cancel my consent by sending a signed letter or statement to Community Resource Project, Inc. at any time, stating that I revoke my consent and no longer allow Community Resource Project, Inc. to obtain consumer or investigative consumer reports about me.

I understand that I am being given a copy of the "Summary of Your Rights Under the Fair Credit Reporting Act" prepared pursuant to 15 U.S.C. Section 1681-1681u. If I am applying for employment in the State of California or if I am a resident of California at the time of applying for employment a summary of provision of California Civil Code section 1786.22 is also being provided to me with this form. If I am applying for employment in the State of New York or if I am a resident of New York at the time of applying for employment, in compliance with Section 380-c of the New York General Business Law, I am being provided with a copy of NY Correction Law Article 23-a. This Disclosure and Authorization form, in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested by Community Resource Project, Inc. .

I authorize, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby consent to your obtaining the above information from ET ALL, Inc. (and/or any of their licensed agents) located at 4382 East La Palma Avenue, Anaheim, CA 92807, (888) 269-6400, www.etall.com. I understand to aid in the proper identification of my file or records, the following personal identifiers, as well as other information, are necessary.

Print Name _____ Other Last Names _____

Social Security Number _____ - _____ - _____

Driver's License Number _____ State _____

Current Address _____

City _____ State _____ Zip _____

Applicant's Signature _____ Date _____

I would like to receive a copy of any report obtained on me by Community Resource Project, Inc. ?
() YES () NO



Print Name: _____

Instructions and Disclosure Statement (OPTIONAL)

To comply with Equal Employment Opportunity regulations, Community Resource Project, Inc. requests that all applicants complete this form. This information will remain confidential. It will not be available to persons involved in the hiring or decision making process, nor will Community Resource Project, Inc. use this information as a basis for selection. **Compliance with this request, while strongly encouraged, is voluntary.** Failure to complete this form will not disqualify you from consideration for employment.

Name (optional): _____ Position Applied For: _____

Sex: Male Female

Ethnic Background: Caucasian Native American / Alaskan Native
 Hispanic African American Asian / Pacific Islanders

Are you a Veteran? Yes No

Do you have any limiting* physical characteristics? Yes No

*Any physical health impairment that requires special education, rehabilitation or related services. This would include but not be limited to:

1. Impairment of sight, hearing, or speech,
2. Impairment of physical ability because of amputation, loss of function or coordination.

We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Because this form is separated from the application, if you are called for an interview and require reasonable accommodation during the interview process, please inform us at that time. Every effort will be made to accommodate you.

For Marketing use: (Voluntary information)

How did you discover this job opening? (Please check all that apply.)

CATEGORY			
<input type="checkbox"/> Internet	<input type="checkbox"/> Craigslist	<input type="checkbox"/> Friend: _____	<input type="checkbox"/> CalJobs: _____
	<input type="checkbox"/> Indeed	<input type="checkbox"/> Phone/Text/Social Media:	<input type="checkbox"/> Friend: _____
<input type="checkbox"/> Job Posting	<input type="checkbox"/> Community Resource Project, Inc. Office	Facebook, Twitter, Tumblr, etc. _____	<input type="checkbox"/> Other: _____
	<input type="checkbox"/> EDD Office		<input type="checkbox"/> CalJobs: _____
<input type="checkbox"/> Word of Mouth	<input type="checkbox"/> Community Resource Project, Inc. Employee	<input type="checkbox"/> <u>Community Resource Project, Inc. website</u>	

KEEP LAST TWO PAGES FOR YOUR RECORDS (pages 7 & 8)
A Summary of Your Rights
Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N. W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - A person has taken adverse action against you because of information in your credit report;
 - You are the victim of identity theft and place a fraud alert in your file;
 - Your file contains inaccurate information as a result of fraud;
 - You are on public assistance’
 - You are unemployed but expect to apply for employment within 60 days.
 In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores of distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. (See www.consumerfinance.gov/learnmore) for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-800-XXX-XXX.
- **You may seek damages from violators.** If a consumer reporting agency, or in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS	CONTACT
<p>1. a. Bank, savings associations, and credit unions with total assets of over \$10 million and their affiliates.</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also be listed, in addition to the CFPB.</p>	<p>a. Consumer Finance Protection 1711 G Street, NW Washington, DC 20552 1-877-382-4367 (Toll-Free)</p> <p>b. Federal Trade Commission: Consumer Response Center - FCRA Washington, CA 20580</p>
<p>2. To the extent not include in item 1 above:</p> <p>a. National banks, federal savings associations, and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks.), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box 111 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer compliance and Outreach (DCCO) 1775 Duke Street Alexandra, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S. E. Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Streets, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8th Floor Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, NE Washington, CD 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22101-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>FTC Regional Office for region in which the creditor operates or Federal Trade Commissioner: Consumer Response Center-FCRA Washington, DC 20580 (877) 382-4357</p>