



Application Process

Last Updated: February 7, 2008

Walker-Lewis, Inc. is an equal opportunity employer and is dedicated to providing a safe, drug-free workplace for all its employees. These standards require applicants to provide certain documents at time of application and if requested, you may be directed to take certain qualifying tests to determine candidacy.

All applicants are required to submit the following:

1. Completed Employment Application
2. Current DMV report (less than 30-days old)
3. Completed Release of Information Form (page 6 of this document)

Applications are not considered complete unless all required documents are received. All applications are held for a period of one year after date of receipt. The above forms may be returned to the Walker-Lewis, Inc. location where the desired employment opportunity is located to the attention of the Human Resources Manager:

Walker-Lewis Rents
 Furniture Rental Showroom
 Party Rental Showroom
 ATTN: Kenda Smith
 4501 Ride Street
 Bakersfield, CA 93313
 (661) 831-7368 office
 (661) 831-4035 fax

Walker-Lewis Rents
 Furniture Rental Showroom
 ATTN: Sylvia Eggleston
 4721 W. Jennifer Ave.
 Suite 3
 Fresno, CA 93722
 (559) 275-6770 office
 (559) 275 6465 fax

Walker-Lewis Rents
 Party Rental Showroom
 ATTN: Allen Meyers
 3415 W. Gettysburg Ave.
 Fresno, CA 93722
 (559) 438-7400 office
 (559) 438-7415 fax

FITNESS FOR WORK NOTICE

Certain positions require a physical assessment evaluation to determine fitness for work. These evaluations are paid for by Walker-Lewis, Inc. and are mandatory following a "contingent offering" of employment. These evaluations are not required for all positions.

DRUG-FREE WORKPLACE NOTICE

In an effort to insure a drug-free workplace, Walker-Lewis, Inc. requires ALL applicants to submit to a Non-NIDA drug screen. This test is mandatory following a "contingent offering" of employment. This test applies to ALL prospective job candidates.

Thank you for your interest in employment with Walker-Lewis, Inc.



Application for Employment

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE ALL PAGES.

DATE _____

Name _____
Last First Middle Maiden

Present address _____
Number Street City State Zip

How long _____ Social Security No. _____ - _____ - _____

Telephone (____) _____

If under 18, please list age _____

Days/hours available to work

No Pref _____ Thur _____

Mon _____ Fri _____

Tue _____ Sat _____

Wed _____ Sun _____

Position applied for _____

Salary desired _____

(Be specific)

How many hours can you work weekly? _____ Can you work nights? _____

Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

When available for work? _____

Have you ever been bonded? No Yes

Are you legally eligible for employment in the United States? No Yes

Have you worked for Walker-Lewis, Inc. before? No Yes, through these dates: _____

Have you applied for a position with Walker-Lewis, Inc. before? No Yes

Do you know or are you related to anyone employed by Walker-Lewis, Inc.? No Yes: _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____



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PAGE 3 of 6

DO YOU HAVE A DRIVER'S LICENSE? Yes No

What is your means of transportation to work? _____

Driver's license number _____ State of issue _____ Operator Commercial (CDL) Chauffeur
 Expiration date _____

Have you had any accidents during the past three years? _____ How many? _____
 Have you had any moving violations during the past three years? _____

OFFICE POSITIONS ONLY

Typing Yes No _____ WPM 10-key Yes No _____ WPM Word Processing Yes No _____ WPM
 Personal Computer Yes No _____ PC _____ Mac Other Skills _____

Please list two references other than relatives or previous employers.

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Address _____	Address _____
_____	_____
Telephone () _____	Telephone () _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.



Application for Employment

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MILITARY	
HAVE YOU EVER BEEN IN THE ARMED FORCES?	__ Yes __ No
ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?	__ Yes __ No
Specialty _____	Date Entered _____ Discharge Date _____

Work Experience Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		To	Final
Your last job title			

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		To	Final
Your Last Job Title			

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.



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PAGE 5 of 6

Work experience Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

May we contact your present employer? Yes No

Did you complete this application yourself Yes No

If not, who did? _____



Release of Information

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

I hereby certify the information supplied on this application for employment is true and correct to the best of my knowledge and agree to have any of the statements checked by Walker-Lewis, Inc. I authorize Walker-Lewis, Inc. to contact any and all of the references listed (including employers and schools), and I authorize those references to provide Walker-Lewis, Inc. any and all information concerning my previous education, employment and any other pertinent information that any of them may have or know about me. Further, I release all parties, companies and persons providing such information to Walker-Lewis, Inc. from any liability for any damages that may result from furnishing such information to Walker-Lewis, Inc. as well as from the use or disclosure of such information to Walker-Lewis, Inc. or any of their agents, employees or representatives. I understand that any misrepresentation, falsification or material omission of information on this application or during the interview process (regardless of when discovered) may result in my failure to receive an offer or, if I am hired, my immediate termination from employment at any time. I understand that any offer of employment from Walker-Lewis, Inc. is conditional on Walker-Lewis, Inc. receiving satisfactory responses to reference requests, passing a drug screen, passing a physical and providing satisfactory proof of my identity & legal authority to work in the United States.

Initial Below	Information for Release	DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS. Applicant Name (Please Print) _____ Applicant Signature _____ Date _____
	Physical Assessment Results	
	Drug Screen Test Results	
	DMV Record History	
	Previous Employment History	
	Salary History	
	Education Verification	
	Military Background Verification	

----- APPLICANT: DO NOT FILL OUT INFORMATION BELOW THIS LINE -----

Reference Check Request

To the attention of _____ From _____
 Company _____ Company Walker-Lewis, Inc.
 Phone _____ Phone _____
 Fax _____ Fax _____

Mr. / Ms. / Mrs. _____ is seeking employment and has listed you as a former employer.

We would greatly appreciate your assistance in verifying the following information.

Position held _____ From _____ To _____
 Reason for leaving _____

Please rate the following	Excellent	Good	Fair	Poor
His/Her Overall Attitude				
His/Her Work Attendance				
His/Her Punctuality				
What type of work best suited for?				
What type of work least suited for?				
Would he/she be eligible for rehire? (Please circle one)	Yes	No	No Comment	

The information provided to Walker-Lewis, Inc. by previous employers of applicants will remain confidential. Thank you for your help in this matter.

Signature _____ Title _____