

Employment Application Form

- Please use PEN and print legibly. Incomplete applications cannot be accepted. For those questions that do not apply to you, indicate N/A in that space.
- Driver applicants must be at least 21 years of age and submit to a physical examination and testing for controlled substances (US DOT). If scheduled for an interview, please provide a motor vehicle report and driver's license at the time.

Last Name: _____ First Name: _____ Middle Initial: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone: () _____ Cell Phone: () _____ Social Security Number (Optional): _____

Position Applying For: _____ Full time Part Time Temporary

Have you ever been employed by Uwajimaya, Inc.? Yes No If Yes, when and where? _____

Are you legally entitled to work in the United States? Yes No Proof of right to work in the US will be required if hired.

Have you ever been convicted of a crime in the last 10 years which has not been annulled or expunged or sealed by a court? (A conviction may not necessarily eliminate you as a candidate for employment.) Yes No

If yes, please indicate the date, nature of the offense and describe in full _____

Salary expectations: _____ Date available to work: _____

How were you referred? _____ If you are under 18, please state your age: _____

Please list computer, machine and other skills and speed: _____

EDUCATION

	Name and Location of School	Years Completed	Degree Received
Grade/Jr. High School			
High School or GED			
College			
Graduate School			
Trade, Business or Vocational School			

LANGUAGE SKILLS

Language: _____	<i>Please check one.</i>		
	Fluently	Good	Fair
Speak _____	_____	_____	_____
Read _____	_____	_____	_____
Write _____	_____	_____	_____
_____	_____	_____	_____
Speak _____	_____	_____	_____
Read _____	_____	_____	_____
Write _____	_____	_____	_____
_____	_____	_____	_____
Speak _____	_____	_____	_____
Read _____	_____	_____	_____
Write _____	_____	_____	_____

HOURS AVAILABLE TO WORK

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
START							
END							

Equal Opportunity Employer

Beginning with current/most recent employer or status, list in DATE ORDER all periods of employment and voluntary work.

If currently employed, may we contact your employer? Yes No

Employer _____ Type of Business _____ Telephone (____) _____
 Address _____ City _____ State & Zip Code _____
 Job Title _____ Wage/Salary _____ Dates Employed _____ to _____
 Duties _____
 Supervisor _____ Title _____ Telephone (____) _____
 Reason for Leaving _____

Employer _____ Type of Business _____ Telephone (____) _____
 Address _____ City _____ State & Zip Code _____
 Job Title _____ Wage/Salary _____ Dates Employed _____ to _____
 Duties _____
 Supervisor _____ Title _____ Telephone (____) _____
 Reason for Leaving _____

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Employer _____ Type of Business _____ Telephone (____) _____
 Address _____ City _____ State & Zip Code _____
 Job Title _____ Wage/Salary _____ Dates Employed _____ to _____
 Duties _____
 Supervisor _____ Title _____ Telephone (____) _____
 Reason for Leaving _____

APPLICANT INFORMATION RELEASE

Please read carefully and sign, or your application will not be processed.

This application was completed by me and all information provided is true and complete to the best of my knowledge. I authorize Uwajimaya, Inc. to investigate all statements contained in this application and to request information about me from previous employers and educational institutions. I expressly authorize my previous employers to provide information and opinions concerning my work and work habits. I also release all parties and persons connected with any requests for information from all claims, liabilities and damages for whatever reason, arising out of furnishing any information that may be sought in arriving at an employment decision. I understand that false or misleading information in this application may be cause for denial of employment or for dismissal, if employed.

I understand that employment at Uwajimaya, Inc. is on an "At-Will" basis. That is, if employed by Uwajimaya, Inc., employment is for no definite period and may be terminated, at any time, with or without notice, by either party.

I also understand that if employed, I must comply with all current and subsequently issued company policies including the drug-free policy in accordance with the US Department of Transportation.

 Signature of Applicant

 Date

To All Applicants,

Federal law requires that Uwajimaya, Inc. maintain an Affirmative Action Program. In accordance, we request that you complete this form. Completion of this form is strictly voluntary. This information will be kept CONFIDENTIAL and will in no manner affect your employment with us.

Name: _____

Date: _____

Ethnic Origin:

- | | |
|--|--|
| <input type="checkbox"/> White | <input type="checkbox"/> American Indian or Alaska Native |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Native Hawaiian or Pacific Islander |
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> Two or more races |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Decline to answer |

Sex: Male Female

Veteran Status: Vietnam Era Veteran Disabled Veteran Other Veteran

Do you have a disability (physical or mental impairment) which substantially limits one or more of your life's activities? Yes No

How did you learn about this opening?

- | | |
|--|--|
| <input type="checkbox"/> Seattle Times | <input type="checkbox"/> Employment Paper |
| <input type="checkbox"/> Korean Times | <input type="checkbox"/> Employee referred |
| <input type="checkbox"/> Chinese Post | <input type="checkbox"/> Agency referred |
| <input type="checkbox"/> North American Post | <input type="checkbox"/> Other: _____ |