

**APPLICATION FOR EMPLOYMENT**

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name

date

**WET**

**GENERAL INFORMATION**

**NAME** \_\_\_\_\_  
last first middle

**EMAIL** \_\_\_\_\_

**CURRENT ADDRESS** \_\_\_\_\_  
address  
city state zip

**TELEPHONE NUMBER** \_\_\_\_\_  
home cell

**POSITION DESIRED** \_\_\_\_\_  full-time  part-time

**SALARY DESIRED** \$ \_\_\_\_\_ /YR. \_\_\_\_\_  
when can you start?

**PROFESSIONAL REFERENCES**

1. name title  
company email  
phone number   may we contact?

2. name title  
company email  
phone number   may we contact?

3. name title  
company email  
phone number   may we contact?

**HOW DID YOU HEAR ABOUT US?** \_\_\_\_\_

**EDUCATIONAL INFORMATION**

**GRADUATE SCHOOL** \_\_\_\_\_  
name city state  
degree obtained major / course of study years completed

**UNIVERSITY** \_\_\_\_\_  
name city state  
degree obtained major / course of study years completed

**HIGH SCHOOL** \_\_\_\_\_  
name city state  
degree obtained years completed

**OTHER** \_\_\_\_\_  
name city state  
degree / certficate obtained major / course of study years completed

**FOREIGN LANGUAGES**

LANGUAGE \_\_\_\_\_ STUDIED \_\_\_\_\_ READ \_\_\_\_\_ WRITE \_\_\_\_\_ SPEAK \_\_\_\_\_

LANGUAGE \_\_\_\_\_ STUDIED \_\_\_\_\_ READ \_\_\_\_\_ WRITE \_\_\_\_\_ SPEAK \_\_\_\_\_

**EMPLOYMENT INFORMATION**

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references.

**PRESENT / LAST EMPLOYER**

company \_\_\_\_\_ type of business \_\_\_\_\_ name / title of last manager \_\_\_\_\_

address \_\_\_\_\_ phone \_\_\_\_\_

title / position \_\_\_\_\_

total compensation \_\_\_\_\_ starting pay \_\_\_\_\_ ending pay \_\_\_\_\_ additional comp. \_\_\_\_\_

reason for leaving \_\_\_\_\_ employment start date \_\_\_\_\_ end date \_\_\_\_\_

**PREVIOUS EMPLOYER**

company \_\_\_\_\_ type of business \_\_\_\_\_ name / title of last manager \_\_\_\_\_

address \_\_\_\_\_ phone \_\_\_\_\_

title / position \_\_\_\_\_

total compensation \_\_\_\_\_ starting pay \_\_\_\_\_ ending pay \_\_\_\_\_ additional comp. \_\_\_\_\_

reason for leaving \_\_\_\_\_ employment start date \_\_\_\_\_ end date \_\_\_\_\_

**PREVIOUS EMPLOYER**

company \_\_\_\_\_ type of business \_\_\_\_\_ name / title of last manager \_\_\_\_\_

address \_\_\_\_\_ phone \_\_\_\_\_

title / position \_\_\_\_\_

total compensation \_\_\_\_\_ starting pay \_\_\_\_\_ ending pay \_\_\_\_\_ additional comp. \_\_\_\_\_

reason for leaving \_\_\_\_\_ employment start date \_\_\_\_\_ end date \_\_\_\_\_

**ARE YOU CURRENTLY EMPLOYED?**  Y  N

**IF YES, MAY WE CONTACT YOUR EMPLOYER?**  Y  N

**HAVE YOU EVER WORKED OR INTERVIEWED FOR WET?**  Y  N

**IF YES, PLEASE GIVE DATES AND POSITION FOR WHICH YOU INTERVIEWED OR WERE HIRED:**

**ARE YOU CAPABLE OF SATISFACTORILY PERFORMING THE ESSENTIAL FUNCTIONS REQUIRED OF THE POSITION FOR WHICH YOU ARE APPLYING, WITH OR WITHOUT REASONABLE ACCOMMODATION?\***  Y  N

**IF HIRED, CAN YOU FURNISH PROOF THAT YOU ARE OVER 18 YEARS OF AGE?**  Y  N

**IF HIRED, CAN YOU FURNISH PROOF THAT YOU ARE ELIGIBLE TO WORK IN THE U.S.?**  Y  N

**DO YOU HAVE ADEQUATE TRANSPORTATION TO AND FROM WORK?**  Y  N

**HAVE YOU EVER BEEN TERMINATED OR ASKED TO RESIGN FROM ANY JOB?**  Y  N

**IF YES, PLEASE EXPLAIN CIRCUMSTANCES:**

**HAVE YOU EVER USED ANOTHER NAME?**  Y  N

**IF YES PLEASE EXPLAIN:**

**\*\*WET** provides reasonable accommodations for disabled workers in accordance with the Americans with Disabilities Act and its state law equivalent. WET is an Equal Opportunity Employer. It is the policy of the Company to provide equal employment opportunities for all applicants and employees. The Company prohibits discrimination on the basis of race, color, religion, gender, sexual orientation, national origin, ancestry, age, physical or mental disability, medical condition, family care status, marital status, veteran status or any other category protected by federal, state or local law.

Y  N

**HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A TRAFFIC VIOLATION?**

Do not answer "Yes" for: (1) any conviction for which the record has been judicially ordered sealed, expunged or eradicated; (2) any misdemeanor conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed; or (3) any marijuana related convictions that are more than two years old. Answering "Yes" will not necessarily disqualify you from employment.

Y  N

**HAVE YOU BEEN ARRESTED FOR ANY MATTERS FOR WHICH YOU ARE OUT ON BAIL OR ON YOUR OWN RECOGNIZANCE PENDING TRIAL?**

**IF YOU ANSWERED "YES" TO ANY OF THE ABOVE-QUESTIONS, PLEASE DESCRIBE THE NATURE OF THE OFFENSE, DATE OF CONVICTION, AND IDENTIFY THE COURT IN WHICH THE CONVICTION WAS ENTERED:**

**NOTE:** Answering "Yes" to these questions does not constitute an automatic bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

I certify that the foregoing statements and answers are true and accurate and understand that any misrepresentation or omission of facts called for on this application will be cause for immediate dismissal from WET. I authorize the companies, schools, and persons identified in this application to furnish the company with any information they may have regarding me. I release said companies, schools, and persons from any damages and claims for furnishing said information.

**SIGNATURE OF APPLICANT**

**DATE**

## **APPLICANT'S STATEMENT AND AGREEMENT**

In the event of my employment to a position in this Company, I will comply with all rules and regulations of this Company. I understand that the Company reserves the right to require me to submit to a test for the presence of drugs in my system prior to employment and at any time during my employment, to the extent permitted by law. I also understand that any offer of employment may be contingent upon the passing of a physical examination. I consent to the disclosure of the results of any physical examination and related tests to the Company. I understand that should I decline to sign this consent or decline to take any of the above tests, my application for employment may be rejected or my employment may be terminated.

I understand that the company may investigate my driving record and my criminal record and that an investigative consumer report may be prepared whereby information is obtained through personal interviews with my neighbors, friends, personal references, and others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics, and mode of living. I understand that I have the right to make a written inquiry within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records and information pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees, and representatives, as well as other individuals who release information to the Company, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me. I authorize the persons named herein as personal references to provide the Company with any pertinent information they may have regarding me.

## **AGREEMENT TO ARBITRATE—PLEASE READ**

In addition to the foregoing, I also acknowledge that the Company utilizes a system of alternative dispute resolution that involves binding arbitration to resolve all disputes that may arise out of the employment context. It is the policy of the Company that all claims, disputes and controversies arising out of or related to my application for employment, employment with the Company or the separation of that employment shall be submitted to binding arbitration with the sole exception of: (i) claims for workers' compensation benefits; (ii) claims for unemployment insurance compensation benefits; and (iii) to the extent required by law, administrative claims or charges before applicable federal and state administrative agencies (including but not limited to the Equal Employment Opportunity Commission, any state agencies that receive and investigate discrimination/harassment complaints, and any claims brought pursuant to the National Labor Relations Act).

By signing below, the Company and I agree that any claim, dispute, or controversy that I have against the Company (or its owners, directors, officers, managers, employees, agents, and affiliates), or that the Company has against me, arising out of or related to my application for employment, employment with the Company or the separation of that employment shall be submitted to, and determined exclusively by, binding arbitration in conformance with the Federal Arbitration Act and the California Arbitration Act (Cal. Code Civ. Proc. §1280 et seq., including section 1283.05 and all of the Act's mandatory and permissive rights to discovery).

Included within the scope of this Mutual Agreement are all disputes, whether based on tort, contract or statute, including, but not limited to, any claims of discrimination, harassment, or retaliation brought under Title VII of the Civil Rights Act of 1964, the Civil Rights Act of 1991, California's Fair Employment and Housing Act, the Age Discrimination in Employment Act, the American with Disabilities Act, the Family Medical Leave Act, California's Family Rights Act, the Employment Retirement Income Securities Act of 1974 and any other employment-related claims of any kind, whether arising under federal, state or local laws.

In addition to any other requirements imposed by law, the arbitrator selected shall be a retired California Superior Court Judge, or otherwise qualified individual to whom the parties mutually agree, and shall be subject to disqualification on the same grounds as would apply to a judge of such court. All rules of pleading (including the right of either party to bring a demurrer), all rules of evidence, all rights to disposition of the dispute by means of motions for summary judgment, judgment on the pleadings, and judgment under Code of Civil Procedure Section 631.8 shall apply and be observed.

The arbitration proceedings will be held in the State of California, County of Los Angeles, before a single, neutral arbitrator, and shall be conducted pursuant to the Employment Arbitration Rules and Mediation Procedures of the American Arbitration Association ("AAA"), in effect at the time of the dispute. These rules are available free of charge online at [www.adr.com](http://www.adr.com). You may also request a copy of the rules by calling Human Resources.

Resolution of the dispute shall be based solely upon the law governing the claims and defenses pleaded, and the arbitrator may not invoke any basis for his or her decision other than controlling law.

Each party shall be solely responsible for paying its own costs for the arbitration including, but not limited to, its own attorneys' fees and expert witness fees. However, the fees of the arbitrator and all other costs that are unique to arbitration shall be paid by the Company where required by law. If either party prevails on a statutory claim which affords the prevailing party their attorneys' fees or where there is a written agreement providing for such fees, the arbitrator may award reasonable attorneys' fees to the prevailing party. The arbitrator shall have the authority to award any damages authorized by law.

The award of the arbitrator shall be in writing and shall contain the arbitrator's factual findings, legal conclusions and reasons for the award. The award, which shall be final and binding.

**IT IS THE POLICY OF THE COMPANY THAT THE COMPANY AND EACH EMPLOYEE VOLUNTARILY AND KNOWINGLY WAIVE ANY AND ALL RIGHTS TO HAVE ANY ARBITRABLE CLAIMS OR DISPUTES HEARD OR ADJUDICATED IN ANY OTHER TYPE OF FORUM, INCLUDING WITHOUT LIMITATION, EACH PARTY'S RIGHT TO A TRIAL IN A COURT OF LAW.**

Should any provision of this policy be deemed invalid or unenforceable, such provision may be severed and the remainder of this policy shall remain in full force and effect.

## **AT-WILL EMPLOYMENT**

Additionally, if hired, I agree as follows: My employment and compensation is terminable at-will, is for no definite period, and my employment and compensation may be terminated by the Company at any time and for any reason whatsoever, with or without cause. No implied, oral, or written agreements contrary to the express language of this agreement are valid unless they are in writing and signed by me and the President of the Company. No supervisor or representative of the Company, other than the President of the Company, has any authority to make any agreements contrary to the foregoing.

This agreement is the entire agreement between the Company and me with respect to the terms and conditions of my employment, and this agreement takes the place of all prior and contemporaneous agreements, representations, and understandings of the employee and the Company.

I hereby acknowledge that I have read the above statements and understand the same.

## **DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT & AGREEMENT**

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**SIGNATURE OF APPLICANT**

**DATE**