



TAKAGI & ASSOCIATES, INC.
Professional Insurance Consultants

540 Pale San Vitores Road, Suite 20C
Flame Tree Plaza
Tamuning, Guam 96913

Application for Employment

TO BE COMPLETED IN FULL, CLEARLY, AND IN BLOCK LETTERS.

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for: Date of application: / /

Referral Source [] Advertisement [] Employee [] Relative [] Government Employment Agency
[] Walk-in [] Private Employment Agent [] Other

Name of source (if applicable)

Name LAST FIRST MIDDLE

Address STREET CITY STATE ZIP CODE Social Security # (Last 4 digits)

Telephone # () Mobile Phone # () Other Phone # ()

E-mail Address

If necessary, best time to call you at home is . AM
. PM

May we contact you at work? [] Yes [] No If yes, work number and best time to call () . AM
. PM

If you are under 18 and it is required, can you furnish a work permit? [] Yes [] No If no, please explain

Are you legally eligible for employment in this country? [] Yes [] No

Date available for work / / What is your desired salary range? \$

Type of employment desired [] Full-Time [] Part-Time [] Temporary [] Seasonal [] Educational Co-Op

Will you relocate if job requires it? [] Yes [] No Will you travel if job requires it? [] Yes [] No

Are you able to meet attendance requirements of 40 hours per week? [] Yes [] No

Will you work overtime if required? [] Yes [] No If no, please explain

Have you ever been bonded? [] Yes [] No If yes, please explain

Driver's License number since driving must be part of the job function State

What Languages do you speak, read and/or write?

(Language(s))

(Speak: Fluently [] Good [] Fair [] / Read: Fluently [] Good [] Fair [] / Write: Fluently [] Good [] Fair [])

(Speak: Fluently [] Good [] Fair [] / Read: Fluently [] Good [] Fair [] / Write: Fluently [] Good [] Fair [])

(Speak: Fluently [] Good [] Fair [] / Read: Fluently [] Good [] Fair [] / Write: Fluently [] Good [] Fair [])

Employment History

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below. Please cover past 7 years.

EMPLOYER	TELEPHONE#	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
	()	FROM	TO	
ADDRESS				
STARTING JOB TITLE / FINAL JOB TITLE		HOURLY RATES/SALARY		
		STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATES/SALARY		
		FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		\$	PER	
EMPLOYER	TELEPHONE#	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
	()	FROM	TO	
ADDRESS				
STARTING JOB TITLE / FINAL JOB TITLE		HOURLY RATES/SALARY		
		STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATES/SALARY		
		FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		\$	PER	
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		STARTING		
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REASON FOR LEAVING		HOURLY RATES/SALARY		
		FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		\$	PER	
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	()	FROM	TO	
ADDRESS				
STARTING JOB TITLE / FINAL JOB TITLE		HOURLY RATES/SALARY		
		STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATES/SALARY		
		FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		\$	PER	

Comments INCLUDING EXPLANATION FO ANY GAPS IN EMPLOYMENT

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Educational Background

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point average or Class Rank. E. Major field of study. F. Minor field of study (if applicable). Cover 4 years of education.

A. SCHOOL	B. NUMBER OF YEARS COMPLETED	C. DEGREE DIPLOMA	D. GPA CLASS RANK	E. MAJOR	F. MINOR

Personal Background

List all prior names and / or alias used.

Residence Background

Provide details for your current residence and prior residence for the past seven (7) years

FROM	TO	ADDRESS	LANDLORD'S NAME	TELEPHONE
				()
				()
				()

References

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

NAME	TELEPHONE	NUMBER OF YEARS KNOWN
	()	Business Personal
	()	Business Personal
	()	Business Personal

Additional Information

List professional, trade, business or civic associations and any offices held.

EXCLUDE MEMBERSHIPS THAT WOULD REVEAL RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, CITIZENSHIP, AGE MENTAL OR PHYSICAL DISABILITIES. VETERAN/RESERVE NATIONAL GUARD OR ANY OTHER SIMILARLY PROTECTED STATUS.

ORGANIZATION	OFFICES HELD

List special accomplishments, publications, awards, etc.

EXCLUDE MEMBERSHIPS THAT WOULD REVEAL RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, CITIZENSHIP, AGE MENTAL OR PHYSICAL DISABILITIES. VETERAN/RESERVE NATIONAL GUARD OR ANY OTHER SIMILARLY PROTECTED STATUS.

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and the federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____

Date _____

Affirmative Action Voluntary Information

COMPLETION OF INFORMATION IS VOLUNTARY

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this application data survey. Providing this information is STRICTLY VOLUNTARY. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this survey is not a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

PLEASE PRINT

Position(s) applied for: _____ Date of application: ____ / ____ / ____

Referral Source

- | | | |
|---|---|--|
| <input type="checkbox"/> Walk-in | <input type="checkbox"/> Government Employment Agency | <input type="checkbox"/> Private Employment Agency |
| <input type="checkbox"/> Employee | <input type="checkbox"/> Relative | <input type="checkbox"/> School |
| <input type="checkbox"/> Advertisement - Source _____ | | <input type="checkbox"/> Other _____ |

Name of person who referred you IF APPLICABLE _____

Applicant Information

Name _____ Telephone # (____) _____
LAST FIRST MIDDLE

Address _____
STREET CITY STATE ZIP CODE

- Male Female

Please check one of the following Equal Employment Opportunity Identification Groups:

- | | | |
|---|---|--|
| <input type="checkbox"/> White (not of Hispanic origin) | <input type="checkbox"/> Black (not of Hispanic origin) | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> Multiracial (having parents of different races)
THIS IDENTIFICATION GROUP IS RECOGNIZED
ONLY IN THE STATE OF MICHIGAN |

For Administrative Use Only

Position(s) applied for Available Not Available

Other positions considered for _____

Hired Yes No

Position hired for _____ Date of hire: ____ / ____ / ____

From the EEO job classifications listed below, which one best describes the position filled?

- | | | |
|---|--|--|
| <input type="checkbox"/> Officials and Managers | <input type="checkbox"/> Sales Workers | <input type="checkbox"/> Operatives (semi-skilled) |
| <input type="checkbox"/> Professionals | <input type="checkbox"/> Office and Clerical Workers | <input type="checkbox"/> Laborers (unskilled) |
| <input type="checkbox"/> Technicians | <input type="checkbox"/> Craft Workers (skilled) | <input type="checkbox"/> Service Workers |

Notes _____

Completed by _____ Date _____

**EMPLOYMENT APPLICATION APPENDIX
TAKAGI & ASSOCIATES, INC.**

All Applicants must answer ALL questions on this form

WARNING: ALL ANSWERS WILL BE VERIFIED

Incomplete answers will result in rejection of your application.
False or misleading answers discovered "post-hire" will result in termination.

Police, District Court & Superior Court Clearances are required.

An employment offer is subject to Drug Screening.

1. Have you ever been disciplined or discharged for absenteeism, tardiness, failure to notify your employer when you were late or absent or for any other attendance-related reasons?
 NO YES *If you answered "Yes", please explain.*

2. Have you ever been disciplined or discharged for theft, unauthorized removal/use of employer or co-worker property or related offense?
 NO YES *If you answered "Yes", please explain.*

3. Have you ever been disciplined or discharged for being under the influence of alcohol or illegal drugs in the workplace or for possession, sale or use of illegal drugs or alcohol in the workplace?
 NO YES *If you answered "Yes", please explain.*

4. Have you ever been disciplined or discharged for insubordination?
 NO YES *If you answered "Yes", please explain.*

5. Have you ever been disciplined or discharged for violating safety rules or safe work environment?
 NO YES *If you answered "Yes", please explain.*

6. Have you ever been convicted of any law violation? Include any plea of "guilty" or "no contest," (Exclude minor traffic violations)
 NO YES *If you answered "Yes", please give details.*
A conviction will not necessarily disqualify an applicant for employment.

RELEASE OF LIABILITY

I authorize TAKAGI & ASSOCIATES, INC. to investigate my personal, educational, financial and employment background, and, I authorize any former employer and any other person, firm, corporation, institution or government agency to give TAKAGI & ASSOCIATES, INC. any information they may have about me. In consideration of TAKAGI & ASSOCIATES, INC. review of my application for employment, I release TAKAGI & ASSOCIATES, INC. and all providers of information from all liability as a result of furnishing or receiving this information.

Applicant's Signature:

Date:

Applicant's Printed Name:

Social Security Number: