

Employment Application

Acrobat Outsourcing is an equal opportunity employer dedicated to non-discrimination in all employment practices. Acrobat Outsourcing selects the best qualified individual for the job based on job-related qualifications regardless of race, age (40+), color, religion, gender, national origin, ancestry, marital status, sexual orientation, disability or any other status protected by applicable law.

PLEASE PRINT

Full Name LYNDON CAOYONAN Date: 10-12-18
 Home Telephone () _____ Other Telephone (949) 304-8138
 Present Address 625 13th ST UNIT C TREASURES ISLAND SF, CA 94130
 Permanent Address, if different from present address: _____
 Email Address lyndoncaoyonan298@gmail.com

EMPLOYMENT DESIRED

Position applying for: CASHIER Salary desired: OPEN

Are you currently registered with any staffing and/or employment agencies? If so, please list _____

Are you applying for: Full-time work? Yes ___ No ___ Part-time work? Yes ☒ No ___

Temporary work, e.g., summer or holiday work? Yes ☒ No ___ From: OPEN To: OPEN

How did you find out about our open position? (Please check fill in proper name of source):

Referral ☒ Name of Referral MORRIS POWELL Newspaper ☐ Job Fair ☐ Agency ☐ Company Website ☐

Other Web Posting ☐ Other Source ☐

Could you work overtime, if necessary? Yes ☒ No ___ If hired, on what date could you start working? _____

Please keep in mind that schedules and shifts may vary depending on position and season. Additionally, the hours may vary from week to week, depending on the company needs. Please list only the times/days you're available to work below.

SPECIFY HOURS AVAILABLE DAILY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
AM	<u>OPEN</u>	<u>u</u>	<u>u</u>	<u>u</u>	<u>u</u>	<u>u</u>	<u>u</u>
PM	<u>OPEN</u>	<u>u</u>	<u>u</u>	<u>u</u>	<u>u</u>	<u>u</u>	<u>u</u>

Do you have any vacations or extended leaves planned in the next 12 months? If so, please list dates: _____

PERSONAL INFORMATION

Have you ever applied to or worked for Acrobat Outsourcing before? Yes ___ No ☒ If yes, when? _____

Do you have friends or relatives working for Acrobat Outsourcing? Yes ☒ No ___ If yes, please state name and relationship

MORRIS POWELL, FRIEND

If hired, would you have a reliable means of transportation to and from work? Yes ☒ No ___

If hired, can you present evidence of your legal right to live and work in this country? Yes ☒ No ___

State age if you are under 18 _____. If you are under 18, hire is subject to verification that you are of minimum legal age to work.

Are you able to perform the essential functions of the job for which you are applying? Yes ☒ No ___

If no, describe the functions that cannot be performed. (Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

Pursuant to any and all Fair Chance Ordinances, we will consider for employment qualified applicants with arrest and conviction records.

EDUCATION & SKILLS

NAME OF SCHOOL	CITY & STATE	GRADE OR DEGREE COMPLETED	DID YOU GRADUATE?
VACA YOLLY ADULT SCHOOL	SOLANO, CA	GED	YES
Do you have any special licenses, certificates or special training? If so please list under "Special."		<input checked="" type="radio"/> YES	NO
Are you computer literate? If so, list software knowledge under "Special."		<input checked="" type="radio"/> YES	NO
Are you proficient with Point of Sales Systems? If, so please list which ones under "Special."		YES	<input checked="" type="radio"/> NO
Do you have any other experience, training, qualifications or special skills, which you feel make you especially suited for work at Acrobat Outsourcing? If so, please list under "Special."		YES	NO
Special: ISO CERTIFIED INTERNAL QUALITY CONTROL AUDITOR, ETA CUSTOMER SERVICE SPECIALIST. MICROSOFT WINDOWS PROGRAMS			

EMPLOYMENT HISTORY

List below all present and past employment starting with your most recent employer (last 10 years is sufficient). Account for unemployment periods of three months or more.

Are you currently employed? Yes ☐ No ☐ **If so, may we contact your current employer?** Yes ☐ No ☐

Name and Address of Employer

Type of Business _____ Telephone No. (____) _____ Supervisor's Name _____
Your Position and Duties _____

Dates of Employment: From _____ To _____

Reason for Leaving: _____

Name and Address of Employer

Type of Business _____ Telephone No. (____) _____ Supervisor's Name _____
Your Position and Duties _____

Dates of Employment: From _____ To _____

Reason for Leaving: _____

Name and Address of Employer

Type of Business _____ Telephone No. (____) _____ Supervisor's Name _____
Your Position and Duties _____

Dates of Employment: From _____ To _____

Reason for Leaving:

Name and Address of Employer

Type of Business _____
Your Position and Duties _____

Telephone No. (____) _____ Supervisor's Name _____

Dates of Employment: From _____ To _____

Reason for Leaving:

Have you ever been fired from any previous place of employment? If so, please explain:

MILITARY SERVICE

Have you obtained any special skills or abilities as the result of service in the military?
If so, describe:

Yes _____ No ☒

JOB RELATED REFERENCES

List below three persons not related to you who have knowledge of your work performance within the last three years.

Name: MILA RECANIA SAYONG

Telephone No. (415) 710-678

Address _____

Occupation: REGIONAL MANAGER Relationship: FRIEND Number of Years Acquainted: 20+

Name: JOHN CONANAN

Telephone No. (707) 319-6584

Address _____

Occupation: PRIVATE SECURITY Relationship: FRIEND Number of Years Acquainted: 20+

Name: MR. TONY RECANIA

Telephone No. (415) 933-2838

Address _____

Occupation: SELF-EMPLOYED Relationship: FRIEND Number of Years Acquainted: 20+

Please Read Carefully, Initial Each Paragraph and Sign Below

X I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material facts on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

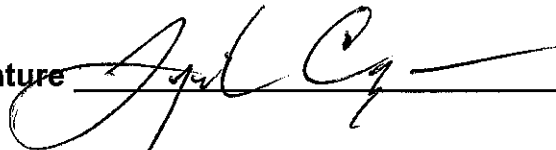
X I hereby authorize Acrobat Outsourcing to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

X I hereby authorize Acrobat Outsourcing and its authorized representatives to solicit information regarding my background, which may include but not be limited to, information about my employment, education, and/or criminal history, which may be in the files of any federal, state, or local criminal justice and law enforcement agency and general public records history.

X I understand that if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 form in this regard within three days of my hire date.

X Acrobat Outsourcing is an at-will employer. I understand that nothing contained in the application, or conveyed during any interview, which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, with or without cause, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

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

Applicant's Signature  Date 10-12-18