



**TRUESDAIL LABORATORIES, INC.**  
 14201 Franklin Avenue  
 Tustin, CA 92780  
 (714) 730-6239 FAX (714) 730-6462  
 www.truesdail.com

**APPLICATION FOR EMPLOYMENT**

Date \_\_\_\_\_  
 Position(s) applying for \_\_\_\_\_

**Personal Data**

Name (last, first, middle) \_\_\_\_\_

Present Address \_\_\_\_\_ How Long? \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

*If less than 2 years, list previous address*

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Message Phone \_\_\_\_\_

E-mail address \_\_\_\_\_

If employed, can you submit verification of your legal right to work in the U.S.? Yes  No

Referred by \_\_\_\_\_

Were you previously employed by our company?

Yes  No  *If yes, state dates below*

To \_\_\_\_\_ From \_\_\_\_\_ Position \_\_\_\_\_

Names of friends or relatives that are employed by Truesdail Laboratories, Inc.

Friend or Realtive \_\_\_\_\_ Relationship \_\_\_\_\_

Friend or Realtive \_\_\_\_\_ Relationship \_\_\_\_\_

Can you perform all of the duties of the job for which you are applying? Yes  No

Have you been convicted of a crime (other than traffic violations) or imprisoned during the last seven years?

(A conviction will not necessarily bar you from employment in that factors such as age, time of offense, seriousness, nature of the violation, and rehabilitation will be taken into account). Yes  No

If yes, *explain* \_\_\_\_\_

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of non job-related medical conditions or handicaps.



**Education Record**

High School \_\_\_\_\_ City and State: \_\_\_\_\_

Graduated? Yes  No  Degrees or Diplomas \_\_\_\_\_ Major \_\_\_\_\_

College/University \_\_\_\_\_ City and State: \_\_\_\_\_

Graduated? Yes  No  Degrees or Diplomas \_\_\_\_\_ Major \_\_\_\_\_

Trade or Technical School \_\_\_\_\_

Graduated? Yes  No  Degrees or Diplomas \_\_\_\_\_ Major \_\_\_\_\_

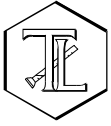
**Employment History**

*Beginning with the most recent employer, list all employers over the last seven years. Attach an additional sheet if needed.*

1. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Beginning Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Manager's Name \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

2. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Beginning Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Manager's Name \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

3. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Beginning Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Manager's Name \_\_\_\_\_ Reason for Leaving \_\_\_\_\_



**TRUESDAIL LABORATORIES, INC.**

3. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Beginning Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
 Manager's Name \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
 \_\_\_\_\_

**References**

List three **professional** references who are familiar with the quality of your work, have worked with you, and have known you at least two years.

1. Reference \_\_\_\_\_ Relationship \_\_\_\_\_  
 Work phone \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Reference \_\_\_\_\_ Relationship \_\_\_\_\_  
 Work phone \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

3. Reference \_\_\_\_\_ Relationship \_\_\_\_\_  
 Work phone \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**I release and promise to hold harmless the educational institutions, the employers (and their employees), the references listed above, and Truesdail Laboratories, Inc. (and its employees). I authorize them to provide information to Truesdail concerning my attendance, grades, employment, character, wages, and any other information relevant to my qualifications for employment at Truesdail.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**I understand that any offer of employment is at-will, i.e., there is no fixed term, I may terminate or be terminated at any time for any reason. The facts set forth in my application for employment are true and complete and I understand that, if employed, false statements on this application shall be considered sufficient cause for dismissal.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_