



PAPER • JANITORIAL • CHEMICAL

"Working to create value for our customers"

Desert Valley Service, Inc DBA: Fulton Distributing

Application for Employment

53-603 Polk Street Coachella, Ca 92236

Office: 760.262.6200 Fax: 760.262.6201

Full Name: _____ Date: _____

Last

First

Middle

Address: _____

Phone: _____ E-Mail: _____ Social Security Number: _____

Position Applying for: _____ Data Available: _____ Desired Salary: _____

Are you a citizen of the United States? Yes: ☐ No: ☐

Have you ever worked for this company before? Yes: ☐ No: ☐

If hired, can you submit proof of legal right to work in the U.S.? Yes: ☐ No: ☐

Are you eligible to receive any and all permits/licenses required by law? Yes: ☐ No: ☐

Have you ever been convicted of a felony? Yes: ☐ No: ☐ If "Yes", Please explain: _____

A conviction will not necessarily be a bar to employment.

Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodation? Yes: ☐ No: ☐

If no, please describe the functions that cannot be performed: _____

Education

High School: _____ Location: _____

Dates Attended: From-____ To-____ Did you graduate? Yes: ☐ No: ☐ Degree Held: _____

College: _____ Location: _____

Dates Attended: From-____ To-____ Did you graduate? Yes: ☐ No: ☐ Degree Held: _____

Other School: _____ Location: _____

Dates Attended: From-____ To-____ Did you graduate? Yes: ☐ No: ☐ Degree Held: _____

Professional References

Please list the name, address, telephone number, and relationship of three individual (not relatives) who are familiar with your work.

Military Experience

Have you ever served in the military? Yes: ☐ No: ☐ If yes, what branch? _____

Date of Discharge: _____ If other than honorable, please explain: _____

Previous Employment

Company Name

Address

City

State

Zip

Phone Number

Position Held

Supervisor Name

Pay Rate

Duties

Reason for Leaving

Company Name

Address

City

State

Zip

Phone Number

Position Held

Supervisor Name

Pay Rate

Duties

Reason for Leaving

Company Name

Address

City

State

Zip

Phone Number

Position Held

Supervisor Name

Pay Rate

Duties

Reason for Leaving

Acknowledgement

PLEASE READ CAREFULLY AND SIGN BELOW

I certify that the statements made on this application are true and correct. I understand that any misrepresentations made in this application will be sufficient cause for denial of employment or discharge. I understand that nothing contained in this application, or the granting of an interview, is intended to be a contract of employment. I certify that if I am employed by Desert Valley Services, d.b.a. Fulton Distributing Company, I will abide by all company rules and regulations.

I authorize Fulton Distributing Company to investigate my background to determine my suitability for employment, if necessary, and to use any information lawfully obtained for any employment-related purpose permitted by law. This investigation may include checking with the schools and employers I have identified, reviewing criminal conviction and driving records, and verifying any other relevant information about me. I release and waive any claims I may have against and indemnify Fulton Distributing Company and any of the schools, former employers, and other persons or entities for any loss or injury I may sustain as a result of any disclosure made related to this application.

The use, possession, or being under the influence of illegal drugs or alcohol while on Company time is prohibited and will result in disciplinary action, up to and including termination of employment. I hereby agree to submit to any lawful drug or integrity testing or post-offer medical examination that may be required as a condition of employment and understand that a refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge. I authorize any physician, hospital, laboratory, or collection site to release to Fulton Distributing Company the results of any test or examination or other information which may be necessary to determine my ability to perform the duties of a job for which I am being considered, prior to employment or in the future during my employment with Fulton Distributing Company.

I understand and agree that any offer of employment with Fulton Distributing Company is conditioned upon my entering into an arbitration agreement with the Company, pursuant to all disputes that might arise out of my employment with the Company, whether during or after that employment, will be submitted to binding arbitration. I understand and agree that this does not alter my status (if hired) as an at-will employee.

Consideration of your employment application is conditioned upon your reading and signing the above paragraph. If you do not wish to sign, thank you for your interest in this Company.

Signature

Date

