

EMPLOYMENT APPLICATION

ITA-CA llc

Db

VITALY

2937 Bristol Street , Suite B100/B103

Costa Mesa, CA 92626

Maurizio@Vitaly.net

www.vitaly.net

VITALY is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, veteran status or any other status protected under local, state or federal laws.

(PLEASE PRINT IN INK)

Position(s) Applied For

Date of Application

Last Name

First Name

Middle Name

Address

City

State

Zip Code

Telephone Number

Alternate Number

Social Security Number

How Did You Hear About Us?

Newspaper Ad Employment Agency Current Employee _____

Other _____

Are you legally eligible to work in the United States?

YES NO

(Proof of eligibility will be required upon offer of employment)

Are you over the age of 18 years?

YES NO

(If no, you may be required to provide authorization)

Have you ever applied to VITALY before? (If yes, please give date.) _____

N.A.

Have you ever worked for VITALY before? (If yes, please give date.) _____

N.A.

Have you ever been convicted of a felony? (A conviction will not necessarily disqualify you.)

YES NO

If yes, please explain: _____

Do you have a valid driver's license?

YES NO

Have you been convicted of any moving violations in the past five years? YES NO

If yes, please explain: _____

Is anyone related to you employed by VITALY ? YES NO

If yes, please give their name and relationship to you. _____

What salary or rate of pay do you expect to receive if employed? _____ per _____

Have you ever been fired or asked to resign from a job? YES NO

If yes, please explain. _____

On what date would you be available to work? _____

Days and Hours Available: (If employed, I will notify my supervisor in writing, should my availability change.)

Day Sunday Monday Tuesday Wednesday Thursday Friday Saturday

AM

PM

EDUCATION

Name and Location of School	Course of Study or Major	# of Years Completed	Diploma/ Degree
--------------------------------	-----------------------------	-------------------------	--------------------

Elementary

High School

College

Graduate

Vocational

Please list any academic honors, scholarships, offices held, etc. (Do not list any which reflect your race, color, religion, gender, national origin, age, disabilities or veteran status.)

Describe any specialized training, apprenticeships, licenses or skills.

Have you received any job-related training in the United States Military? YES NO

Please give dates and explanation:

EMPLOYMENT HISTORY (*Begin with current or most recent employer.*) Do not exclude any employment. Include any applicable temporary employment attach another sheet if necessary. Previous salaries or wages will not be used to determine compensation at VITALY .)

Company Name	Employment Dates		Salary		Name and Title of Supervisor
	From	To	Start	End	
Address			\$	\$	
Phone	Describe your duties:				
Reason for leaving and explanation					

Company Name	Employment Dates		Salary		Name and Title of Supervisor
	From	To	Start	End	
Address			\$	\$	
Phone	Describe your duties:				
Reason for leaving and explanation					

Company Name	Employment Dates		Salary		Name and Title of Supervisor
	From	To	Start	End	
Address			\$	\$	
Phone	Describe your duties:				
Reason for leaving and explanation					

Company Name	Employment Dates		Salary		Name and Title of Supervisor
	From	To	Start	End	
Address			\$	\$	
Phone	Describe your duties:				
Reason for leaving and explanation					

Please provide any other information that you feel will help us in considering your application for employment.

REFERENCES (Please list three persons, who are not related to you or previous supervisors, who can provide professional references.)

Name	Address	Phone Number	Relationship / Occupation	Years Known
-------------	----------------	-------------------------	--------------------------------------	------------------------

APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION

PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by VITALY (hereinafter referred to as "VITALY") that such employment with VITALY is at will, for no specified duration and may be terminated by either VITALY or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of VITALY or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of VITALY except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of VITALY.

In consideration for employment with VITALY, if employed, I agree to conform to the rules, regulations, policies and procedures of VITALY at all times and understand that such obedience is a condition of employment. I understand that due to the nature of VITALY business, attendance and punctuality are considered essential requirements of every job at VITALY and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with VITALY, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to VITALY and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

Signature

Date

Name and number of person completing this form if other than applicant:

VITALY IS PROUD TO BE AN EQUAL OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW.9