## **EMPLOYMENT APPLICATION**

K PLACE 16925 S Main St STE B/C Gardena, CA 90248

It is the policy of K PLACE to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

l.	Applicant Information			
	Applicant Full Name:			
	Home Address:			
	City/State/ZIP:			
	Mobile phone:			
	Fluent language:			
	If more than one language:			
2.	Emergency Contact			
	Who should be contacted if you are involved in an emergency?			
	Contact Name:			
	Relationship to you:			
	Address:			
	City/State/ZIP:			
	Phone:			
3. 4.	Job Position Applied For: Warehouse Team Associate  Who referred you to our company?			
т.	who referred you to our company.			
5.	Do you have any friends or relatives who work here? If yes, please list here:			
5.	Have you applied to our company previously? Yes No. If yes, when			
7.	Are you available to work Monday through Friday? Yes / No			
3.	Are you available to work weekends? Yes / No			
9.	If applicable, are you available to work overtime? Yes / No			

10.	If you are offered employment, when would you be available to begin work?					
11.	If hired, are you able to submit proof that you are legally eligible for employment in the United States? Yes / No					
12.	Applicant Employment History					
emplo and e	your current or most recent employment first. Please list all jobs (including self- byment and military service) which you have held, beginning with the most recent, and list explain any gaps in employment. If additional space is needed, continue the back page of explication.					
Emple	oyer Name:					
Addre						
City/S	State/ZIP:					
Job D	uties:					
	on for Leaving:					
Dates	of Employment (Month/Year):					
Emm1	Nome:					
Addre	oyer Name:					
	State /7ID.					
Job D						
	on for Leaving:					
Dates	of Employment (Month/Year):					
Emple	oyer Name:					
Addre	ess:					
City/S	State/ZIP:					
Job D						
Reaso	on for Leaving:					
Dates	of Employment (Month/Year):					
13. A	pplicant's Education and Training					
	College/University Name					
	Did you receive a degree? Yes / No If yes, degree(s) received:					

14. Please provide an answer to the following questions.

Tell us about a time you took initiative:	
What do you know about our company?	
What would you do if you noticed a coworker was doing something incorre	ectly?
What is your ideal work environment?	
Do you have experience in warehousing or logistics?	
	What do you know about our company?  What would you do if you noticed a coworker was doing something incorre  What is your ideal work environment?

What we will need from you upon offer of employment:

APPLICANT SIGNATURE

- Valid identification and employment eligibility documents

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize K PLACE to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to communicate information fully and freely regarding my previous employment, attendance, and grades. I authorize those persons designated as references to communicate information fully and freely regarding my previous employment and education.

I HAVE CAREFULLY REAI	D THE AROVE CERTIE	ICATION AND LUN	DERSTAND AND
AGREE TO ITS TERMS.	D THE ABOVE CERTIF.	ICATION AND TON	DEKSTAND AND

**DATE**