



APPLICATION PROCESS

BS&E Co., Inc. is an equal opportunity employer and is dedicated to providing a safe, drug-free workplace for all its' employees. These standards require applicants to provide certain documents at time of application and if requested to take certain qualifying tests to determine candidacy. We encourage all applicants to review the available position notices and job descriptions. These documents are made available to the public at no charge.

All applicants are required to submit the following:

1. **Complete Background Check Authorization**
2. **Completed Release of Information Form**
3. **Completed Employment Application**
4. **Current DMV report {less than 30 days old}**

Applications are not considered complete unless all required documents are received. All applications are held for a period of one year after date of receipt. The above forms may be returned to the District Administration office or mailed directly to the Personnel Manager at the address below.

**BSE Rents
ATT: Human Resources
6319 District Blvd.
Bakersfield, CA 93313**

FITNESS FOR WORK NOTICE:

Certain positions require a physical assessment evaluation to determine fitness for work. These evaluations are paid for by the Company and are mandatory following a "contingent offering" of employment. **DRUG-FREE WORKPLACE NOTICE:**

In an effort to insure a drug-free workplace ALL applicants must submit to a Non-NIDA drug screen. This test is mandatory following a "contingent offering" of employment. This test applies to ALL prospective job candidates.

BSE RENTS RELEASE of INFORMATION

| | |
|--|--|
| Reference Check Request | |
| To: | From: |
| Company: | Address: |
| Phone: | Phone: |
| Fax: | Fax: |
| Mr. / Mrs. / Ms. _____ | Is seeking employment and has listed you as a former employer. |
| Please verify the following information: | |
| Position held: _____ | From: _____ To: _____ |
| Reason for leaving: _____ | |

| | Excellent | Good | Fair | Poor |
|--------------------------------------|--------------|------|------------|------|
| Overall Job Performance | | | | |
| Attitude | | | | |
| Attendance | | | | |
| Punctuality | | | | |
| What type of work best suited for? | | | | |
| What type of work least suited for? | | | | |
| Would he/she be eligible for rehire? | Yes | No | No Comment | |
| Signature: _____ | Title: _____ | | | |

I hereby certify the information supplied on this application for employment is true and correct to the best of my knowledge, and agree to have any of the statements checked by B.S. & E. Co. Inc., unless I have indicated to the contrary. I authorize B.S. & E. Co. Inc. to contact any and all or the references listed (Including employers and schools), and I authorize those references to provide B.S. & E. Co. Inc. any and all information concerning my previous education and employment and any other pertinent information that any of them may have or know about me. Further, I release all parties, companies, and persons providing such information to B.S. & E. Co. Inc. from any liability for any damages that may result from furnishing such information to B.S. & E. Co. Inc., as well as from the use or disclosure of such information by B.S. & E. Co. Inc. or any of their agents, employees, or representatives. **I understand that any misrepresentation, falsification, or material omission of information on this application or during the interview process (regardless of when discovered) may result in my failure to receive an offer or, if I am hired, my immediate termination from employment at any time.**

I understand that any offer of employment from B.S. & E. Co. Inc. is conditional on B.S. & E. Co. Inc. receiving satisfactory responses to reference requests, passing a drug screen, passing a physical, and providing satisfactory proof of my identity and legal authority to work in the United States.

This application will be considered active for a maximum of thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS.

| Applicant initial | Information for Release |
|------------------------------|---|
| | Physical Assessment Results |
| | Drug Screen Test Results |
| | DMV Record History |
| | Previous Employment History {dates of hire, terms for separation, etc.} |
| | Salary History |
| | Education Verification |
| | Military Background Verification |
| Applicant's Name: _____ | |
| Applicant's Signature: _____ | |
| Date: _____ | |

**BSE RENTS Employment Application
Personal Information**

| Last Name | | First Name | | Middle | |
|---|-----------------|---|---|----------------------------|--|
| Address | | | | | How long? |
| City | State | Zip | | | |
| Previous Address | | | | | How long? |
| City | State | Zip | | | |
| Home Phone: | | E-mail: | | Driver's Lic #: | |
| Position applied for: | | <input type="checkbox"/> Part time <input type="checkbox"/> Full time | | Salary desired: | |
| Have you ever applied here before? | | Y <input type="checkbox"/> N <input type="checkbox"/> If yes please give date and position: | | | |
| State names of friends/relatives currently employed by B. S. & E. Co., Inc.: | | | | | |
| Why are you applying for work at BSE Rents? | | | | | |
| Are you over 18 years of age? | | <input type="checkbox"/> Y <input type="checkbox"/> N (If under 18, hire is subject to verification that you are of minimum legal age.) | | | |
| If hired, can you present proof of your legal right to live and be employed in the United States of America? | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N Background Information |
| If hired, would you have a reliable means of transportation to and from work? | | | | | |
| Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? <input type="checkbox"/> Y <input type="checkbox"/> N. If no, describe the functions that cannot be performed. | | | | | |
| <i>(Note: we comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hired may be subject to passing a medical examination, and to skill and agility tests.)</i> | | | | | |
| Have you ever been convicted of a felony? | | <input type="checkbox"/> Y <input type="checkbox"/> N If "Yes", please describe situation in full: | | | |
| <i>(Note: Affirmative answers do not automatically disqualify your application. The nature of the offense, date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for may, however, be considered.)</i> | | | | | |
| Education / Training | | | | | |
| School | Name Address | No. of years completed | Did you graduate? | Degree / Diploma | |
| High School | | | <input type="checkbox"/> Y <input type="checkbox"/> N | | |
| College / University | | | <input type="checkbox"/> Y <input type="checkbox"/> N | | |
| Vocational / Business | | | <input type="checkbox"/> Y <input type="checkbox"/> N | | |
| Military Service | Branch: | Period of active duty: | Rank at discharge: | Special skills / training: | |

Employment History
(Begin with most recent employment)

| | | |
|---|----------------------------|------------------|
| Company Name: | Supervisor's Name / Title: | |
| Address: | Phone #: | |
| Employment Dates {mm/yy}: | Start: | End: |
| Type of business: | Starting Pay Rate: | Ending Pay Rate: |
| Position Held: | Description of Duties: | |
| Exact reason for leaving: | | |
| | | |
| May we contact your former employer for reference? <input type="checkbox"/> Y <input type="checkbox"/> N If No, please explain: | | |

| | | |
|---|----------------------------|------------------|
| Company Name: | Supervisor's Name / Title: | |
| Address: | Phone #: | |
| Employment Dates {mm/yy}: | Start: | End: |
| Type of business: | Starting Pay Rate: | Ending Pay Rate: |
| Position Held: | Description of Duties: | |
| Exact reason for leaving: | | |
| | | |
| May we contact your former employer for reference? <input type="checkbox"/> Y <input type="checkbox"/> N If No, please explain: | | |

| | | |
|---|----------------------------|------------------|
| Company Name: | Supervisor's Name / Title: | |
| Address: | Phone #: | |
| Employment Dates {mm/yy}: | Start: | End: |
| Type of business: | Starting Pay Rate: | Ending Pay Rate: |
| Position Held: | Description of Duties: | |
| Exact reason for leaving: | | |
| | | |
| May we contact your former employer for reference? <input type="checkbox"/> Y <input type="checkbox"/> N If No, please explain: | | |

| | | |
|---|----------------------------|------------------|
| Company Name: | Supervisor's Name / Title: | |
| Address: | Phone #: | |
| Employment Dates {mm/yy}: | Start: | End: |
| Type of business: | Starting Pay Rate: | Ending Pay Rate: |
| Position Held: | Description of Duties: | |
| Exact reason for leaving: | | |
| | | |
| May we contact your former employer for reference? <input type="checkbox"/> Y <input type="checkbox"/> N If No, please explain: | | |

Personal References

| | | |
|-------------|--------------------------|--------|
| First Name: | Last Name: | Phone: |
| Address: | | |
| Occupation: | No. of years acquainted: | |

| | | |
|-------------|--------------------------|--------|
| First Name: | Last Name: | Phone: |
| Address: | | |
| Occupation: | No. of years acquainted: | |

| | | |
|-------------|--------------------------|--------|
| First Name: | Last Name: | Phone: |
| Address: | | |
| Occupation: | No. of years acquainted: | |

Volunteer / Community Service

| | | |
|-----------------|---------------------|--------|
| Organization: | Director / Contact: | Phone: |
| :Position Held: | Duties: | |
| Skills Learned: | | |

| | | |
|-----------------|---------------------|--------|
| Organization: | Director / Contact: | Phone: |
| :Position Held: | Duties: | |
| Skills Learned: | | |

| |
|---|
| Other Special Skills / Training you feel are relevant to the position for which you are applying: |
|---|

I, the undersigned, authorize B. S. & E. Co., Inc. to investigate all statements contained in this application and understand that misrepresentation or omission of facts called for is cause for immediate disqualification or dismissal. Furthermore, I understand that employment is "At Will" and not for any specific period or duration and may be terminated at any time with or without cause or notice by either B.S. & E. CO., INC or myself.

Signed: _____

Date: ____ / ____ / ____