



An Equal Opportunity Employer

DATE _____

Employment Desired

Position: _____

Salary Desired: _____ Location (City/State): _____

Last Name _____ First Name _____

Present Address

No. & Street _____ City _____ State _____ Zip _____

(____) ____ - ____ Business Phone (____) ____ - ____ Home Phone (____) ____ - ____ Mobile Phone _____ Email

If hired, on what date can you start work?

Personal Information

Have you ever applied to or worked for DEL REY Systems & Technology, Inc. before? Yes No
If yes, when? _____

Do you have any friends or relatives working for DEL REY Systems & Technology, Inc.?

Yes No

If yes, state name(s) and relationship:

Name _____ Relationship _____

Name _____ Relationship _____

Military Service

Have you obtained any special skills or abilities as the result of service in the military? Yes No
If so, describe:

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of Employer (____) ____ - ____
Telephone No.

Type of Business Your Supervisor's Name

Address & Street City State Zip

Dates of Employment: _____ Weekly Pay: _____
From To Starting Ending

Your Position and Duties

Reason for Leaving

May we contact this employer for a reference? Yes No

References

List below references not related to you who have knowledge of your work performance.

First Name Last Name (____) ____ - ____
Telephone No.

Address & Street City State Zip

Occupation No. of Years Acquainted

First Name Last Name (____) ____ - ____
Telephone No.

Address & Street City State Zip

Occupation No. of Years Acquainted

First Name Last Name (____) ____ - ____
Telephone No.

Address & Street City State Zip

Occupation No. of Years Acquainted

Please Read Carefully, Initial Each Paragraph and Sign Below

Initials I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials I hereby authorize DEL REY to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initials I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

Initials Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Company, I am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

Date

Applicant's name (please print)

Applicant's Signature

Date Received By Human Resources

Blank Page