



Application for Employment

CPI is an Equal Opportunity/Affirmative Action Employer and voluntarily complies with Federal, State and Municipal Laws that prohibit discrimination in employment because of race, color, religion, sex, national origin, age, handicap or veteran status. This application will receive consideration for sixty (60) days. If you have not heard from us within sixty days and wish to receive further consideration for employment, it will be necessary for you to request in writing that the company reactivate your application for another sixty days.

Instructions:

1. Type or print in blue or black ink.
2. Answer each question.
3. Read Affirmation carefully – then sign and date.

Name – Last		First		Middle Initial	
Present Address		Street		City	
				State	
				Zip	
Mailing Address (if different from above)			Home Phone (Include Area Code)		
			()		
What position are you applying for?			Alternate Phone (Include Area Code)		
			()		
Wage or Salary Desired			Are you legally eligible for employment in this country?		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Date Available			Are you 18 years of age or older?		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you previously applied for a position at CPI?		Have you ever been previously employed with CPI?			
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, when and at what location:		If Yes, when and at what location:			
List any relatives currently employed by Chatsworth Products:			Relationship:		
How did you learn about the position you are applying for?					
<input type="checkbox"/> Advertisement		<input type="checkbox"/> College / Career Center		<input type="checkbox"/> Military Service	
<input type="checkbox"/> Employment Agency		<input type="checkbox"/> Open House		<input type="checkbox"/> Internet Website: _____	
<input type="checkbox"/> Walk In		<input type="checkbox"/> State Employment Service		<input type="checkbox"/> CPI Employee Referral: Emp. Name: _____	
<input type="checkbox"/> Newspaper		<input type="checkbox"/> Career Fair		<input type="checkbox"/> Other: Please explain: _____	
Are you able to perform the essential functions of this job with or without reasonable accommodation?			Are you able and willing to work any of the following shifts?		
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Day <input type="checkbox"/> Evening <input type="checkbox"/> Night		
			Are you able and willing to work overtime?		<input type="checkbox"/> Yes <input type="checkbox"/> No
			Are you able and willing to work a compressed workweek?		<input type="checkbox"/> Yes <input type="checkbox"/> No
EDUCATION List below all schools attended including Business, Vocational, Night, Military, College, etc. Attach transcripts of academic records if readily available.					
Type of School	Name and Address of School	Major Course of Study		Diploma/Degree Received	
High School					
College					
Graduate School					
Trade School					
Other					
Thesis Title – Graduate					
Publications, Special Study or Research					

Circle Highest Grade Completed: 1 2 3 4 5 6 7 8 9 10 11 12	College or University: 1 2 3 4 5	Graduate School: 1 2 3 4
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EMPLOYMENT				List all employment (include U.S. Military Service. Start with present or most recent position. Include all jobs (or last four jobs, whichever is less.) Please provide all information requested for each position. "See Resume" is not a valid response. However, you may attach a resume to provide additional information					
Dates				Name and Address Of Employer	Job Title	Supervisor Name and Title	Salary		Reason for Leaving
From		To					Starting	Current or Ending	
Mo.	Yr.	Mo.	Yr.						

What knowledge, special technical or computer skills, and/or other qualifications have you acquired from employment or other experience? Include any specific equipment that you can proficiently operate.

OUTSIDE ACTIVITIES
Professional memberships, certificates or licenses held.
(Exclude those indicating race, color, religion, sex, national origin, age, handicap, or Veteran status).

Patents and/or Inventions.

PROFESSIONAL/WORK REFERENCES WE MAY CONTACT
Include at least two past or current supervisors. Include area code.

Name	Title	Name	Title
Employed By	Business Phone ()	Employed By	Business Phone ()
Employer Address		Employer Address	
Name	Title	Name	Title
Employed By	Business Phone ()	Employed By	Business Phone ()
Employer Address		Employer Address	

Security Information
Persons employed at Chatsworth Products, Inc. have access to confidential information regarding various phases of Company business. Therefore, the Company follows the usual practice of requiring new employees, at the time of employment, to sign a proprietary information and conflict of interest agreement. Information concerning competitors operation, products, designs or other proprietary information will not be solicited from an applicant for employment, or from the Company's employees. CPI will honor any valid post employment restrictions contained in an applicant's employment contract and fully respect the applicant's duty of loyalty and nondisclosure to an applicant's former employer.

Affirmation (Important – Read Carefully)
I certify that the statements made by me on this application form and in the supplementary material furnished are true, correct, and complete to the best of my knowledge. I understand that any omission or misrepresentation of material fact may result in refusal or separation from employment. **I understand that employment with Chatsworth Products, Inc. requires drug screening prior to employment** and I agree to submit to a drug screening upon request and to cooperate fully in supplying requested information. **I understand that Chatsworth Products, Inc. conducts background investigations prior to employment** and I agree to supply the information required by Chatsworth Products, Inc. to conduct a background investigation. I further understand that this background investigation may include, but may not be limited to, criminal conviction records, employment history verification educational verification, and social security number verification, etc. I hereby authorize the release of any information concerning me, written or not, in the possession of my present and former employers (if contact is specifically authorized above), supervisors, co-workers, physicians, schools, and any others who might be contacted by the company or its representatives with reference to my employment, and I hereby release them from any liability whatsoever. Furthermore, I understand that Chatsworth Products, Inc. is an "At-Will" employer and if I am employed with the company, my employment can terminate at any time with or without cause by either party.

Signature of Applicant _____ **Date** _____