

EMPLOYMENT APPLICATION

Institute for Progressive Medicine, Inc.
4 Hughes #175
Irvine, California 92618

AN EQUAL OPPORTUNITY EMPLOYER

Please print your responses. The employer is sometimes referred to below as "Company."

Please read the attached job description for the position being applied for.

IDENTIFICATION:

Date: _____

Name [last name first]: _____ Social Security No. _____

Present Address: _____
[street] [city] [state] [zip code]

Phone No.: _____

Referred by: _____

Permanent address
(if different from above): _____
[street] [city] [state] [zip code]

EMPLOYMENT APPLIED FOR:

Position: _____

Are you applying for:

Salary Desired: _____

Full Time Temporary (includes holiday or
 Part Time summer employment)

Days and hours you are available for work: _____

Date you are able to start: _____

Are you currently employed? Yes If so, may we request information from your present employer? Yes
 No No

Will you be available to work: Weekends? Yes Overtime as necessary? Yes
 No No

Have you ever applied for work with this Company before? Yes If so, Where? _____
 No

PERSONAL INFORMATION:

EDUCATION:	Name and Location of Institution	Years Attended	Did you Graduate?	Name of Degree or Diploma?	Subjects Studied
Grammar School			Yes ____ No ____		
High School			Yes ____ No ____		
College or University			Yes ____ No ____		
Trade, Vocational Business or Correspondence School			Yes ____ No ____		

GENERAL:

Do you possess any other background, training, skills or knowledge that qualify you for the position applied for? Yes

No

If so, please specify:

U.S. Military Service: _____
Rank? _____

Are you 18 years of age or older? Yes (Persons under 18 must verify they are of minimum legal age to be hired)

No

If the Company hires you, will you be able to document your U.S. citizenship or prove your legal right to live and be employed in the U.S.? Yes

No

Have you been convicted at any time of a felony or serious criminal misdemeanor? Yes

No

(NOTE: You do not have to list convictions for marijuana offenses more than two years old.)

If yes, specify the crime(s), the date and location of the conviction and the current status of the case:

(NOTE: An applicant will not be turned down for employment solely because he/she has been convicted of a crime. The particular crime, the date of conviction, the circumstances of the crime and the relation of the nature of the crime to the position being applied for can be considered by the Company in making the decision.)

If you are applying for a professional position:

Do you have a license or certificate for the position desired? Yes
 No

Name of license or certificate: _____ Number: _____
 State of Issuance: _____ Date: _____

Has the license or certificate been suspended or revoked at any time? Yes
 No

If yes, please specify the grounds, date of action and date of reinstatement:

I have read and I understand the attached job description for the position being applied for: Yes
 No

I am able to carry out the essential aspects of the position I am applying for: Yes
 No

If not, please state the job functions that cannot be carried out:

(NOTE: This Company complies with the federal Americans with Disabilities Act and California's Fair Employment and Housing Act and will thus strive to implement measures needed to reasonably accommodate qualified applicants and employees to handle essential functions of a job. Hiring may be conditioned on passing a medical examination and/or tests of skill and dexterity.)

HISTORY OF EMPLOYMENT:

[List below last four employers, starting with last one first]

Date [Mo. and Year]	Name, Address and Telephone No. of Employer	Type of Business	Salary	Position(s)	Reason for Leaving
From:	Supervisor:		Start \$ _____		
To:			End \$ _____		
From:	Supervisor:		Start \$ _____		
To:			End \$ _____		
From:	Supervisor:		Start \$ _____		
To:			End \$ _____		
From:	Supervisor:		Start \$ _____		
To:			End \$ _____		

Please explain any gap in the employment history above: _____

REFERENCES:

Please supply three people not related to you who can supply first-hand information of your work skills and performance within the past four years.

Name	Address and Telephone No.	Business	Occupation	Years Known

Please fully read and understand the text below, initial separately at each paragraph, and date and sign at the bottom:

- _____ 1. I acknowledge and attest that I have completed this application for employment as well as any and all other related or supplemental documents personally and that all the answers supplied in this application and the other documents are complete and accurate. I also acknowledge and attest that I have not intentionally omitted or failed to disclose any data that may reduce my prospects for employment with this Company. I further acknowledge, attest and agree that any falsification or omission of, or failure to disclose, such relevant information shall cause the Company, on discovery of the problem, to reject the application or, if I am employed, to immediately terminate employment.

- _____ 2. I authorize the Company to research and investigate, through the references I have supplied and any other lawful channel, my employment history, education, skills and any other matter related to my qualifications for the position applied for. I similarly authorize the references I have supplied to disclose to the Company -- and, unless otherwise required by law, without any notice to me of such disclosure -- any and all reports, transcripts, letters and other records and documents related to my past work, education and any other matter related to my qualifications for employment. Further, I hereby release the Company, all my past employers, all my past educational institutions and all other individuals, corporations, partnerships and organizations from any and all actions, suits, claims, demands, liabilities, damages, costs, and expenses, including reasonable attorney fees, arising from or in any way related to such research, investigation and/or disclosure.

- _____ 3. 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 company personnel, 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.

- _____ 4. Having read and understood the attached job description, I acknowledge and agree that in order to enable the Company to determine whether I possess the skills and other personal qualities necessary to qualify for the position I am applying for, the Company may engage in a testing and interview process. The tests may include but not be limited to those that measure intelligence, aptitude and personality traits required to meet the requirements of the position, including but not limited to meeting the Company's standards for performance, interpersonal relations and competence on the job. Accordingly, I hereby release the Company and any and all Company employees, representatives, associated testing services and any and all other individuals, corporations, partnerships and organizations from any and all actions, suits, claims, demands, liabilities, damages, costs, and expenses, including reasonable attorney fees, arising from or in any way related to such testing and interview processes, including but not limited to claims based on any state or federal rights of privacy.

_____ 5. I acknowledge and agree that in the event of any claim or dispute that arises from my submission of this application and that cannot be resolved by initial direct communications between myself and the Company, the claim or dispute shall be resolved by binding arbitration pursuant to the provisions of California Code of Civil Procedure (CCP), Title 9, beginning with section 1280. CCP section 1283.05 (manner of taking depositions) shall not apply to any claim not covered by CCP section 1283.1(a). The American Arbitration Association (AAA) shall arbitrate such dispute unless another third party arbitrator is agreed upon in writing by both parties. The arbitration shall be conducted either in accordance with the Model Employment Arbitration Procedures of the AAA which are in effect at the time of the arbitration or, if an alternative arbitrator is agreed upon, in accordance with the then current rules and procedures of that other third party arbitrator. I understand however that by this agreement, the arbitrator is prohibited from imposing any type of fees, cost or expense upon me that I would not be required to bear if I were free to bring a legal action in court. I also understand that nothing in this agreement to arbitrate application-related disputes prohibits me from submitting a workplace-related administrative claim as permitted by law with the California Department of Fair Employment and Housing or any other agency. In the event I am hired by the Company, then its published policies and procedures for resolution, mediation and arbitration of disputes with employees, including but not limited to those stated in the Company's employment agreement, shall replace this agreement to arbitrate.

_____ 6. I acknowledge and agree that nothing in this application and nothing in communications between me and Company representatives or associates during the application, interview and/or testing process is intended to create an offer of employment or a contract of employment between me and the Company. I further acknowledge and agree that if hired by the Company, nothing in this application and nothing in communications between me and Company representatives or associates during the application, interview and/or testing process and nothing in my employment is intended to create or should be construed to create anything other than "at-will" employment for no definite or determinable period, employment that may be terminated by either me or the Company at any time, for any reason or no reason at all and without prior notice. I further acknowledge and agree that no promises or representations contrary to any of the points made in these five numbered paragraphs are binding on the Company unless stated in writing and signed by me and an authorized Company representative.

Date: _____ Signature: _____

Interviewed by: _____ Date: _____

***** DO NOT WRITE BELOW THIS LINE *****

NOTES: _____

Approved: 1. _____ 2. _____ 3. _____

Personnel Manager

Department or Division Head

Executive Director

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