

# TORREY PINES INSTITUTE FOR MOLECULAR STUDIES, INC.

## Application for Employment

### AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

All employment decisions are made without regard to unlawful considerations of race, sex, religion, national origin, age disability, or any other legally protected status. Reasonable accommodations are available to qualified disabled individuals, upon request.

**PLEASE ANSWER ALL QUESTIONS**

Date: \_\_\_\_\_

#### PERSONAL INFORMATION

NAME	Last	First	Middle
IF APPLICABLE , LIST OTHER NAMES YOU ARE KNOWN BY			
PRESENT ADDRESS			HOME PHONE
Street	City	State	Zip Code
E-MAIL ADDRESS			MOBILE PHONE:
Are you over the age of 18? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, you will be required to submit a work permit or proof of graduation from high school or the equivalent, if hired.		If hired, can you provide proof that you are a citizen or national of the United States of America, a lawful permanent resident or an alien authorized to work in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No (Proof of employment authorization status will be required if you are hired.)	
Have you worked for us before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state the date you left and the reason for leaving:		Do you have any relatives employed by us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give names:	

#### EMPLOYMENT DESIRED

Position desired	Date you can start, if offered employment	Compensation desired
Are you applying for: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Intern		Hours and days available:
Can you perform the essential functions of the job for which you are applying with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No (The Human Resources representative will provide a description of the essential functions of the position.)		
If required, are you willing to work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Briefly describe your qualifications for the position desired and any special skills or experiences you possess that will be of special benefit in the job for which you are applying:		
Which source prompted your application? <input type="checkbox"/> Advertisement <input type="checkbox"/> Walk In <input type="checkbox"/> Employment Agency <input type="checkbox"/> Other  <input type="checkbox"/> Employee Please provide name:		

**CRIMINAL RECORD HISTORY**

Have you ever been convicted of a crime?

Yes  No

**California Applicants Only:** Do not list the following: arrests or detention that did not result in conviction; convictions for which the record has been judicially ordered sealed, expunged, or statutorily eradicated; misdemeanor convictions for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed; any arrest for which a pretrial diversion program has been completed; or any marijuana conviction more than two years old.)

If yes, what was (were) the offense(s)?

Date(s) and place(s) of conviction

A CONVICTION RECORD WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT. Factors such as age at the time of the offense, type of offense and relevance to the job for which you are applying, seriousness and nature of the offense, and rehabilitation will be taken into account.

**EDUCATION**

NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	LIST DEGREES	GRADUATED? YES/NO
High School				
Jr. College or College				
University				
Technical or Vocational School				

**REFERENCES**

Please provide the name, address and telephone number of three people who would be willing to provide a business reference.

NAME/RELATIONSHIP	ADDRESS/PHONE	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

**WORK HISTORY** (Please fill out completely, even if accompanied by resume)

(List most recent work experience (paid or unpaid) first. Account for all time and complete all items.)

Company Name:	Telephone ( )	<b>DATES EMPLOYED</b> From Mo/Yr.   To Mo/Yr.
Address:		<b>BASE RATE OF PAY</b> Start   End
Street	City State Zip Code	
Your title and Description of Work Performed:		
Supervisor:		May we contact this employer for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:		
Company Name:	Telephone ( )	<b>DATES EMPLOYED</b> From Mo/Yr.   To Mo/Yr.
Address:		<b>BASE RATE OF PAY</b> Start   End
Street	City State Zip Code	
Your title and Description of Work Performed:		
Supervisor:		May we contact this employer for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:		
Company Name:	Telephone ( )	<b>DATES EMPLOYED</b> From Mo/Yr.   To Mo/Yr.
Address:		<b>BASE RATE OF PAY</b> Start   End
Street	City State Zip Code	
Your title and Description of Work Performed:		
Supervisor:		May we contact this employer for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:		
Company Name:	Telephone ( )	<b>DATES EMPLOYED</b> From Mo/Yr.   To Mo/Yr.
Address:		<b>BASE RATE OF PAY</b> Start   End
Street	City State Zip Code	
Your title and Description of Work Performed:		
Supervisor:		May we contact this employer for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:		

You may attach a sheet, if necessary, to provide further information regarding your work history.

**CERTIFICATION**

*Read carefully before signing application.*

I certify that the information given by me in this employment application is true and correct and contains no material omissions of any kind. I understand that any false statements or material omissions of fact made by me in this employment application or the interview process may disqualify me from employment or result in my termination. I understand that any offer of employment by TORREY PINES INSTITUTE FOR MOLECULAR STUDIES, INC. will be contingent upon an investigation of my background and fitness for employment, including, but not limited to, an investigation of all the information provided in this employment application.

I release TORREY PINES INSTITUTE FOR MOLECULAR STUDIES, INC., its employees and agents from any and all liability for failing to hire me or terminating my employment due to such false information or material omissions made by me. I authorize the companies, schools or persons named above to give to TORREY PINES INSTITUTE FOR MOLECULAR STUDIES, INC. any information regarding my employment or educational background, together with any information they may have regarding my qualifications for the job for which I am applying, whether or not it is in their records. I hereby release said companies, schools or persons and their employees and agents from any and all liability resulting from the disclosure of this information to TORREY PINES INSTITUTE FOR MOLECULAR STUDIES, INC.

I UNDERSTAND AND AGREE THAT IF I AM HIRED, MY EMPLOYMENT RELATIONSHIP WITH TORREY PINES INSTITUTE FOR MOLECULAR STUDIES, INC. IS AT-WILL, WHICH MEANS THAT IT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE OR ADVANCE NOTICE, BY EITHER ME OR TORREY PINES INSTITUTE FOR MOLECULAR STUDIES, INC. In addition, if I am hired, TORREY PINES INSTITUTE FOR MOLECULAR STUDIES, INC. will have the right to impose discipline or alter my position, duties or reporting relationship at its discretion. I understand and agree that no representative of TORREY PINES INSTITUTE FOR MOLECULAR STUDIES, INC. may enter into any agreement contrary to the foregoing unless it is done by way of a specific, written agreement signed by the Vice President of Administration.

I HAVE READ THE PROVISIONS SET FORTH ABOVE AND AGREE TO ALL THE TERMS AND CONDITIONS STATED HEREIN.

*Signed:* \_\_\_\_\_

Date \_\_\_\_\_

**CONFIDENTIAL APPLICANT IDENTIFICATION RECORD  
VOLUNTARY SURVEY**

**TO THE APPLICANT:** Torrey Pines Institute for Molecular Studies, Inc. (the “Institute”) is a government contractor/subcontractor subject to Executive Order 11246, as amended, the Vietnam Era Veterans Readjustment Assistance Act of 1974 and Section 503 of the Rehabilitation Act of 1973, which require the Institute to take affirmative action to employ and advance in employment minorities, women, qualified disabled individuals, qualified special disabled veterans, veterans of the Vietnam Era, newly separated veterans, and other protected veterans. In addition, the Institute is an Equal Employment Opportunity Employer and, as such, conducts all employment-related activities without regard to unlawful considerations of race, national origin, gender, disability, age, religion or any other legally protected category.

We must demonstrate that we meet Equal Employment Opportunity requirements and are taking appropriate affirmative action. Periodically, we must report statistical information to the state and/or federal government about our applicants and employees. The information requested below will help us meet our reporting requirements. It will not be used for any unlawful purposes. Your submission of this information, or refusal to provide it, will not affect your application for employment nor be used to make any unlawful employment decisions. Your application will be considered in the same manner whether or not you complete this form. The information provided will be kept confidential, except as required or permitted by law, and maintained separately from your employment application and your main personnel file. Your participation is *entirely voluntary* and greatly appreciated.

Name \_\_\_\_\_ Date \_\_\_\_\_

Position Applied For: \_\_\_\_\_

GENDER:     Male         Female

**RACE/ETHNIC ORIGIN**

- AMERICAN INDIAN OR ALASKAN NATIVE (NOT HISPANIC OR LATINO) — A person with origins in any of the original peoples of North America and South America (including Central America), and who maintain tribal affiliation or community attachment.
- ASIAN (NOT HISPANIC OR LATINO) — A person with origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER (NOT HISPANIC OR LATINO) — A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- BLACK OR AFRICAN AMERICAN (NOT HISPANIC OR LATINO) — A person having origins in any of the black racial groups of Africa.
- HISPANIC OR LATINO — A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
- WHITE (NOT HISPANIC OR LATINO) — A person with origins in any of the original peoples of Europe, North Africa.
- TWO OR MORE RACES (NOT HISPANIC OR LATINO) — All persons who identify with more than one of the above races.

**VETERAN STATUS**

- VIETNAM ERA VETERAN** — a person who: (i) served on active duty in the U.S. military, ground, naval or air service for a period of more than 180 days, and who was discharged or released therefrom with other than a dishonorable discharge, if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961 and May 7, 1975 or, (B) between August 5, 1964 and May 7, 1975, in all other cases; or (ii) was discharged or released from active duty in the U.S. military, ground, naval or air service for a service-connected disability if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961 and May 7, 1975 or, (B) between August 5, 1964 and May 7, 1975 in any other location.
- NEWLY SEPARATED VETERAN** — A veteran who served on active duty in the U.S. military, ground, naval or air service during the one year period beginning on the date of such veteran's discharge or release from active duty.
- OTHER PROTECTED VETERAN** — A veteran who served on active duty in the U.S. military, ground, naval or air service during a period of war or in a campaign or expedition for which a campaign badge has been authorized.
- I do not wish to complete this questionnaire.