# NORTON SIMON ENTITIES\*

## **Employment Application**

AN EQUAL OPPORTUNITY EMPLOYER: We believe that the mutual goals of our business and the community can best be met through our policy that consideration of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, military and veteran status, sexual orientation, or other protected status, has no place in the selection, training or promotion of employees.

Please Prin	t					
Name						
	Last	Firs	t		Middle	
Address						
	Street	City	У	State	Zip Cod	e
Telephone						
	Home (with area code)		Cell (with area code)			
	Business (with area code)		May we call you at you	ır workplace?	□ Yes	🗆 No
Have you ever	been employed or attended school und	der a	nother name?		□ Yes	🗆 No
If yes,	what name?					
How long have	e you lived at your present address?					
If less than two	o years, please list your previous address	s:				
Address						
	Street	City	y State		Zip Cod	e
Have you previously applied for employment at the Norton Simon Entities?					□ Yes	$\Box$ No
If yes,	when?					
Have you ever been employed by the Norton Simon Entities?				□ Yes	🗆 No	
If yes,	when?					
Does the Nort	on Simon Entities currently employ an	ny of	your relatives?		□ Yes	□ No
If yes,	list name:					

\*Norton Simon Entities are comprised of the following: Norton Simon Museum of Art at Pasadena and the Norton Simon Art Foundation. Employment may be with either, or both, of these entities.

#### POSITION

Position applying for \_\_\_\_\_

Date available to begin employment \_\_\_\_\_

Earnings expected \$\_\_\_\_\_

### OTHER

Drivers license number/state \_\_\_\_\_

Have you ever been discharged, asked to resign, or otherwise been involuntarily terminated from any job?

□Yes	□No	If yes, explain	
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#### **EDUCATION**

It is against the Age Discrimination in Employment Act of 1967 to discriminate against an applicant for employment on the basis of age.

High School	City, State		Graduate (yes/no)	Date	# of years completed	
College/University Military or Trade School	City, State	Major	Graduate (yes/no)	Date	# of years attended	Degree/ Certificate

## U.S. MILITARY EXPERIENCE

Military Branch	Years of Service	Reserve Status
Duties, Experience and Ranks Held		
*		

#### WORK EXPERIENCE

Begin with the most recent position; account for all time whether employed or not.

Company/Organization				
Address				
Telephone				
Supervisor's Name & Title				
Employed	FROM Month	Year	TO Month	Year
Title				
Duties				
Reason for leaving or considering a change				

Company/Organization				
Address				
Telephone				
Supervisor's Name & Title				
Employed	FROM Month	Year	TO Month	Year
Title				
Duties				
Reason for leaving or considering a change				

Company/Organization				
Address				
Telephone				
Supervisor's Name & Title				
Employed	FROM Month	Year	TO Month	Year
Title				
Duties				
Reason for leaving or considering a change				

May we contact the employers listed above?  $\Box$  Yes  $\Box$  No If no, indicate which one(s) you do not wish us to contact:

### SPECIALIZED SKILLS

Complete if applicable to position

Office Machines Operated					
Software Knowledge					
Typing Speed 10-key by touch? $\Box$ Yes $\Box$ No					
Foreign language proficiencies:					
What other job qualifications do you possess?					

#### REFERENCES

Please list three business references who know of your work abilities:

Name/Title	Company	Business Phone	Home Phone	
Name/Title	Company	Business Phone	Home Phone	
Name/Title	Company	Business Phone	Home Phone	

## DECLARATION

I understand that:

- if hired, employment with the Norton Simon Entities is not for any specified term and may be terminated by the employee or by the Norton Simon Entities at any time for any reason, with or without cause;
- an offer of employment may be contingent up successful completion of the Norton Simon Entities medical examination;
- an offer of employment may be contingent upon the results of a pre-employment criminal background check;
- an offer of employment may be contingent upon the results of a pre-employment drug/alcohol screening exam, and that I will be required to authorize the release of the results of the exam to the Norton Simon Entities;
- proof of my identity and proof of my authorization to work in the United States must be given in accordance with the Immigration Reform and Control Act of 1986 and any amendments thereto;
- in making this application for employment, I will be required to authorize an investigation of my financial and credit record through any investigative or credit agencies or bureaus of your choice; I
- authorize my educational institutions, employers and other individuals to give information concerning me, whether or not it is on their records, and I release them and their companies from any liabilities whatsoever.

I certify that all my statements given on this application are correct, and realize that falsification, misrepresentation, or material omission of information of this or any other personal record may result in the withdrawal of any offer made or in my discharge.