



# Tucci Learning Solutions, Inc.

6 Hangar Way, Suite A Watsonville, CA 95076 (831) 786-0600/ fax: (831) 786-0644  
positions@tuccionline.com

## Application For Employment

### Personal Information

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
 Last name                      Middle                      First                      Social Security Number

\_\_\_\_\_  
 Current Street Address                      City                      State                      Zip Code

\_\_\_\_\_  
 Home Phone                      Cell Phone                      E-mail

Are you 18 years or older?                       Yes                       No

### General Information

Have you ever applied at Tucci Learning Solutions?  No     Yes If yes, when? \_\_\_\_\_

How did you learn about Tucci Learning Solutions?  
 Friend     School District     Job Fair     On Campus     Internet     Other

Are you eligible for work in the U.S.?     Yes     No (Proof of eligibility required at time of employment)

Have you ever been convicted of a felony?     Yes     No

Have you ever been discharged from an employer?     Yes     No  
 If yes, explain: \_\_\_\_\_

Position applying for: \_\_\_\_\_                      Expected Salary: hourly rate/annual: \$ \_\_\_\_\_

Available for:  Full time: 30-40hrs.     Part time: Less than 30hrs. If part time, please list availability:  
 Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_

If your application is considered favorably, on what date will you be available for work: \_\_\_\_\_

### Education (List Last 3 Schools Attended)

School	Location (City, State)	No. Yrs.	Degree/Diploma	Major/Minor
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



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## *Work Experience (List Most Recent Employment First)*

**Company:** \_\_\_\_\_ **Start:** \_\_\_\_\_ **End:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Last or Current Supervisor:** \_\_\_\_\_

\_\_\_\_\_ **Start Rate:** \_\_\_\_\_ **End Rate:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Reason for Leaving:** \_\_\_\_\_

**Company:** \_\_\_\_\_ **Start:** \_\_\_\_\_ **End:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Last or Current Supervisor:** \_\_\_\_\_

\_\_\_\_\_ **Start Rate:** \_\_\_\_\_ **End Rate:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Reason for Leaving:** \_\_\_\_\_

**Company:** \_\_\_\_\_ **Start:** \_\_\_\_\_ **End:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Last or Current Supervisor:** \_\_\_\_\_

\_\_\_\_\_ **Start Rate:** \_\_\_\_\_ **End Rate:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Reason for Leaving:** \_\_\_\_\_

I hereby give permission to contact the employers listed above concerning my prior work experience: \_\_\_\_\_

If there is a particular employer you do not want us to contact, please indicate which one and reason:

\_\_\_\_\_

\_\_\_\_\_

## *Personal References* Please list two personal references

Name	City	Phone Number	# of Years Known
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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## *Notification and Agreement*

I certify that all answers given by me are true, accurate, and complete. I understand that the falsification, misrepresentation or omission of fact on this application (or any other accompanying or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.

**Signature:** \_\_\_\_\_

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