

**GENERAL:**

IS THERE ANY REASON YOU CANNOT PERFORM ALL OF THE ESSENTIAL FUNCTIONS OF THE JOB YOU ARE APPLYING FOR? IF SO, PLEASE EXPLAIN. MR. GATTI'S HAS A DUTY TO YOU TO MAKE SURE YOU ARE NOT INJURED ON THE JOB, SO IT IS IMPERATIVE THAT YOU ARE HONEST ABOUT ANY LIMITATIONS THAT MIGHT PREVENT YOU FROM DOING YOUR NECESSARY DUTIES.

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DURING THE PAST 10 YEARS HAVE YOU EVER BEEN CONVICTED OF A CRIME EXCLUDING TRAFFIC VIOLATIONS?

YES \_\_\_\_\_ NO \_\_\_\_\_ IF "YES", DESCRIBE IN FULL \_\_\_\_\_

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(A CONVICTION WILL NOT NECESSARILY BAR YOU FROM EMPLOYMENT)

DO YOU HAVE RELATIVES EMPLOYED IN THE MR. GATTI'S SYSTEM? YES \_\_\_\_\_ NO \_\_\_\_\_

**REFERENCES:** NAMES AND ADDRESSES OF THREE PERSONS NOT RELATED TO YOU AND NOT LISTED AS SUPERVISOR ABOVE, WITH WHOM YOU HAVE BEEN ACQUAINTED FOR AT LEAST ONE YEAR.

	NAME	COMPLETE ADDRESS	TELEPHONE	OCCUPATION
1.				
2.				
3.				

A ROUTINE INQUIRY MAY BE MADE WHICH WILL PROVIDE INFORMATION CONCERNING CHARACTER, REPUTATION AND PERSONAL CHARACTERISTICS. IF SUCH INQUIRY IS MADE, YOU MAY OBTAIN ADDITIONAL INFORMATION AS TO THE NATURE AND SCOPE OF THE REPORT UPON WRITTEN REQUEST.

UPON EMPLOYMENT I WILL FURNISH PROOF OF AGE (IF NECESSARY), AND PROOF OF CITIZENSHIP OR WORK PERMIT.

I CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, AND I UNDERSTAND THAT ANY MISREPRESENTATION OR WILLFUL OMISSION OF FACTS SHALL BE CAUSE FOR REJECTION OF THIS APPLICATION OR TERMINATION OF EMPLOYMENT. I HEREBY AUTHORIZE MR. GATTI'S TO CONDUCT WORK HISTORY, PERSONAL REFERENCE OR POLICE RECORD INQUIRIES TO DETERMINE MY ACCEPTABILITY FOR EMPLOYMENT.

I FURTHER AGREE TO OBSERVE ALL RULES, REGULATIONS, AND POLICIES OF MR. GATTI'S.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_