

INSTRUCTIONS:

This Application for Employment form is provided by:

Buck Owens Production Company, Inc.
and
Buck Owens' Crystal Palace, Inc.

For positions at **Buck Owens Production Company, Inc.:**

Send your completed application form, resume, and cover letter to:

Buck Owens Production Company, Inc.
Attn: Human Resources
3223 Sillect Avenue
Bakersfield, CA 93308

For positions at **Buck Owens' Crystal Palace, Inc.:**

Apply in person or send your application and resumes with complete references to:

Buck Owens' Crystal Palace, Inc.
Attn: Human Resources
2800 Buck Owens Blvd.
Bakersfield, CA 93308

When submitting your Application for Employment, you may also attach other supporting information (i.e. resume, letters of recommendation, etc.). Please note; however, that we require a completed Application for Employment before employment consideration is made.

ALL APPLICATIONS FOR EMPLOYMENT MUST BE SIGNED

This Application for Employment form is provided in a PDF format and is normally completed using Adobe Reader. Please note that the information that you enter in the form while displayed on your computer cannot be saved – so, be sure to PRINT THE FORM BEFORE CLOSING.

It is recommended that you complete the form on your computer. You may; however, complete portions of the form in pen (please print) but you **MUST** enter your full name in the name block on page one **BEFORE** you print the form. You may not enter your name in pen.

NOTE: You cannot send the completed form as an Email attachment through your email system while in Adobe Reader – the data you have entered will **NOT** transmit and we will receive only a blank form. You may; however, scan your completed form and send the electronic copy of the scanned document/s as an Email attachment to:

employment@buckowens.com

APPLICATION FOR EMPLOYMENT

**Buck Owens Production Company, Inc.
Buck Owens' Crystal Palace, Inc.**

FAIR EMPLOYMENT: It is the policy of employer to prohibit unlawful discrimination on the basis of any characteristic protected by applicable local, state, or federal law. If you believe your equal employment rights have been violated, you may contact the appropriate state or federal EEO agency.

PLEASE PRINT

Full Name			
Current Address	City	State	Zip Telephone
Most Recent Previous Address	City	State	Zip How long (MO/YR to MO/YR)? From ___/___ to ___/___
Prior Previous Address	City	State	Zip How long (MO/YR to MO/YR)? From ___/___ to ___/___
What position or type of work are you seeking?	How did you learn of the position that you are seeking?		Are you age 18 or older? <input type="checkbox"/> No <input type="checkbox"/> Yes
Are you interested in: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> On-Call	What days and hours are you willing to work?		Willing to work overtime? <input type="checkbox"/> No <input type="checkbox"/> Yes
Have you applied here before? <input type="checkbox"/> No <input type="checkbox"/> Yes - When: _____	Have you previously been employed here? <input type="checkbox"/> No <input type="checkbox"/> Yes - When: _____ Under what name: _____		
Are you presently employed? <input type="checkbox"/> No <input type="checkbox"/> Yes	May we inquire of your employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	Are you on layoff and subject to recall? <input type="checkbox"/> No <input type="checkbox"/> Yes	If employed, can you submit verification of your right to work in the US? <input type="checkbox"/> No <input type="checkbox"/> Yes

EDUCATION AND SKILLS

Check the boxes that indicate all levels of completed education:

<input type="checkbox"/> High School Graduate or GED	<input type="checkbox"/> Some College	School _____	<input type="checkbox"/> Trade or Business School	School _____
	<input type="checkbox"/> College Graduate	Degree _____		Field of Study _____
		Major _____		

List certificates or licenses you hold, or specialized training you have completed that may help qualify you for employment:

List equipment (including computer programs and applications) you operate that may help qualify you for employment:

List job-related professional or technical organizations to which you belong:

GENERAL INFORMATION

What do you expect to be doing in five years?

What has been your most interesting work?	What made it interesting?
What work experience did you dislike most?	Why did you dislike it?

What do you consider to be the greatest accomplishment in your work history?

Why are you applying for work with us?	Date available to begin work:
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COMPLETE REVERSE SIDE OF THIS FORM

EMPLOYMENT HISTORY/PERSONAL REFERENCES

List ALL periods of employment, self-employment, U.S. military service, volunteer work, and/or non-employment starting with the MOST RECENT FIRST. Personal references may be listed following employment history—please do not list relatives.

From To	Employer Address and Telephone Number	Position/Duties Supervisor's Name Reason for Leaving
From To	Employer Address and Telephone Number	Position/Duties Supervisor's Name Reason for Leaving
From To	Employer Address and Telephone Number	Position/Duties Supervisor's Name Reason for Leaving
From To	Employer Address and Telephone Number	Position/Duties Supervisor's Name Reason for Leaving
From To	<input type="checkbox"/> Employer <input type="checkbox"/> Personal Reference Address and Telephone Number	Position/Duties (Describe relationship if personal reference) Supervisor's Name Reason for Leaving
From To	<input type="checkbox"/> Employer <input type="checkbox"/> Personal Reference Address and Telephone Number	Position/Duties (Describe relationship if personal reference) Supervisor's Name Reason for Leaving

CERTIFICATION AND ACKNOWLEDGMENT

I certify that all information submitted in this application form, or in any resume, interview, or other information, is true and complete and that I have not knowingly withheld, nor will I withhold, any information that would affect my application for employment. I understand that employer is under no obligation to consider or reconsider this application at any time, and that acceptance of my application does not constitute an offer of employment. I ALSO UNDERSTAND AND AGREE THAT:

1. Inquiries may be made with my previous employers, personal references, and others (herein collectively "persons") who may have knowledge of me. I authorize such "persons" to give you any and all information concerning my previous employment (including but not limited to, an assessment of my job performance, ability, and fitness for employment), and/or any other information they may have. I release all such persons from any and all liability, claims, or damages that may directly or indirectly result from furnishing same. Upon my reasonable and timely request, a description of the general scope and nature of any such inquiry will be provided to me to the extent required by applicable law.
2. Prior to my beginning work or during my employment, employer reserves the right to require any lawful form of medical, drug, alcohol, psychological, character, honesty, integrity, aptitude, skill, or other test or examination.

If employed, I understand and agree that my employment is "at-will" and may be terminated with or without cause or notice at my option or at the option of employer.

Signature

Date