AQUARIUM OF THE PACIFIC

For the safety and security of our staff and our guests, we conduct thorough background checks on all applicants.

AQUARIUM OF THE PACIFIC

APPLICATION FOR EMPLOYMENT

The Aquarium of the Pacific is a strong believer in equal opportunity for all.

Please print clearly. Please answer all questions completely.

GENERAL INFORMATION

Last Name: _____ First Name: _____ MI: _____ Date: _____

Street Address: _____ Apt: _____

City: _____ State: _____ Zip Code: _____

Home Phone: ( ) _____-_____ Message/Work Phone: ( ) _____-_____

E-mail Address:

_____

To assist verification, what other name(s) have you used while in school or during your employment?

_____

Position for which you are applying: _____

How did you hear about this position: _____

Salary Desired: $_____ per Hour ☐ per Year ☐

Employment Desired: Full Time ☐ Part Time ☐ Seasonal Part Time ☐ Temporary ☐

What days/hours are you available to work? _____

How much overtime are you able to work? _____

If hired, can you submit proof that you have the legal right to work in the United States? Yes ☐ No ☐

Please describe what "superior customer service" means to you and why you feel it is important. _____

_____

_____

Please describe why you wish to work at the Aquarium of the Pacific. _____

_____

AQUARIUM OF THE PACIFIC
100 Aquarium Way, Long Beach, CA 90802 E-mail: Jobs@LBAOP.org; FAX: (562) 951-1669; TEL: (562) 951-1671

Please describe your computer skills and list the software programs with which you are fluent:_____

_____

If applicable, please list any equipment and/or knowledge that you possess which qualify you for this position. Also, are you bilingual? If so, please indicate in what language. _____

_____

EMPLOYMENT HISTORY – LIST MOST RECENT EMPLOYER FIRST

(Even if you are providing us with a résumé, please complete this section in its entirety and list all previous employers. Attach additional sheet if necessary.)

(1) Employment Dates: From ____/____/____ To ____/____/____

Employer: _____

Employer's Address: _____

Employer's Phone Number: ( ) _____-_____ Type of Business: _____

Name and Title of Your Supervisor: _____

Supervisor's Phone Number: ( ) _____-_____

Your Job Title: _____ Current/Ending Salary: $_____ per Hour ☐ per Year ☐

Duties and **Prior Customer Service Training Received**: _____

_____

_____

Reason for Leaving: _____

If still employed, may we contact your current employer? _____

****

(2) Employment Dates: From ____/____/____ To ____/____/____

Employer: _____

Employer's Address: _____

Employer's Phone Number: ( ) _____-_____ Type of Business: _____

Name and Title of Your Supervisor: _____

Supervisor's Phone Number: ( ) _____-_____

Your Job Title: _____ Current/Ending Salary: $_____ per Hour ☐ per Year ☐

Duties and **Prior Customer Service Training Received**: _____

_____

_____

Reason for Leaving: _____

(3) Employment Dates: From _____/_____/_____ To _____/_____/_____

Employer: ____

Employer's Address: ____

Employer's Phone Number: ( ) _________-__________ Type of Business: ____________________

Name and Title of Your Supervisor: ____

Supervisor's Phone Number: ( ) _________-__________

Your Job Title: ______________________ Current/Ending Salary: $_______ per Hour ❑ per Year ❑

Duties and **Prior Customer Service Training Received:** ____

____

____

Reason for Leaving: ____

****

Have you ever worked or volunteered at the Aquarium of the Pacific? If yes, please explain the details:_____

____

EDUCATION

Name and Location of High School: ______________________ Did you finish? Yes ❑ No ❑

Name and Location of College(s) attended: ____

Major: ______________________ Degree(s) Granted and Date(s): ____________________

Technical School or Trade School Experience and Date(s): ____

____

List any other education, training courses, honors and/or achievements that are pertinent to the position for which you are applying: ____

____

Please initial here to indicate you have read the position description for the job for which you are applying:_______

Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodation? Yes ❑ No ❑ If no, describe the function(s) that cannot be performed: ______________

____

U.S. MILITARY SERVICE

Service Branch: ____

Please describe any duties that would prove useful to job skills related to the position you are applying for here.

____

PROFESSIONAL REFERENCES

List the name, address, telephone number, email address and relationship of three individuals (not relatives) **who are familiar with your work** – for example current or former employers, co-workers, teachers, instructors. Include at least one former or current supervisor or a person of authority such as a professor, teacher, coach, etc., and list where you worked with him/her.

1. _____

2. _____

3. _____

ACKNOWLEDGEMENT

PLEASE READ CAREFULLY. INITIAL EACH PARAGRAPH AND SIGN BELOW.

_____I certify that the statements I have made on this application are true and correct, and I have not knowingly withheld any information. I understand that any misrepresentations made in this application will be sufficient cause for denial of employment or discharge. I understand that nothing contained in this application, or the granting of an interview, is intended to be a contract of employment. I also understand that employment with the Aquarium of the Pacific is "at-will" and that either of us may terminate the relationship at any time, for any reason, with or without cause. I certify that if employed by the Aquarium of the Pacific, I will abide by all company rules and regulations.

_____I authorize the Aquarium of the Pacific to investigate my background to determine my suitability for employment and to use any information lawfully obtained for any employment-related purpose permitted by law. This investigation may include checking with the schools and employers I have identified. I release and waive any claims I may have against and indemnify the Aquarium of the Pacific and any of the schools, former employers and other persons or entities for any loss or injury I may sustain as a result of any disclosure made related to this application.

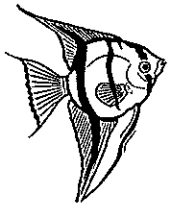
_____The use, possession, or being under the influence of illegal drugs or alcohol while on Company time is prohibited and will result in disciplinary action, up to and including termination of employment. I hereby agree to submit to any lawful drug or integrity testing or post-offer medical examination that may be required as a condition of employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including termination. I authorize any physician, hospital, laboratory or collection site to release to the Aquarium of the Pacific the results of any test or examination or other information which may be necessary to determine my ability to perform the duties of a job for which I am being considered, prior to employment, or in the future during my employment with the Aquarium of the Pacific.

_____ If offered a position at the Aquarium of the Pacific, it will be contingent upon the satisfactory results of a criminal background check.

_____I understand that if I become employed at the Aquarium of the Pacific, a commitment to upholding the mission of the Aquarium will be expected, with a focus on customer service, co-worker and volunteer respect, and maintaining a culture of integrity for people, animals and the environment.

SIGNATURE: _____ Date: ____/____/____

PRINT/TYPE NAME: _____



Our Mission

To instill a sense of wonder, respect and stewardship for the Pacific Ocean, its inhabitants and ecosystems.