



Hyder Property Management Professionals Employment Application

Hello and Welcome to Hyder Property Management Professionals! We manage over 90 properties and have positions in the Maintenance, Office, and Managerial functions.

In order to properly classify your application for current as well as future positions please fill out the information below:

What position(s) are you interested in?	Custodian
	Maintenance
	Manager (Property)
	Manager (Regional)
	Office
	Security

We have properties throughout California....which areas would you be willing to travel/relocate/work in?

Blythe	Northern CA
Chula Vista	Orange County
Coachella Valley	Ramona
Escondido/San Marcos/Vista	Riverside area
Imperial Valley	San Bernardino County
Los Angeles County	San Diego





Hyder Property Management Professionals Employment Application

An Equal Opportunity Employer

Please Print				
Date	Last Name	First Name	Middle	
Present Addr	ress			
No. & Street		City	State Zip	
Permanent A	ddress (if different from pr	esent address)		
No. & Street		City	State Zip	
Business Phone	_ -	ne Phone		
Employmen	t Desired			
Position appl	lying for:			
_	gular full-time work?			
-	•	1- 1: 1 1-0		
Ten	nporary work, e.g., summer	or holiday work?	Yes No	
What days ar	nd hours are you available f	for work?		
If applying fo		what period of time will you be a To:	vailable?	
Are you avai	lable for work on weekend	s?		
Would you be available to work overtime, if necessary?				
If hired, on w	vhat date can you start work	ς?		
Personal Inf	formation			
How did you	hear about our company a	nd this job opening?		
Have you ever	= =	Hyder Property Management?	Yes No	
Why are you	applying for work at Hyde	r?		

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If hired, w	ould you have a relia	ble means of transportation to	and from work?
•	•	if under 18, hire is subject to ve	erification that you are of Yes No
		pential functions of the job for volume ommodation?	which you are applying, either Yes No
If no, desc	ribe the functions tha	at cannot be performed.	
		consider reasonable accommodation more subject to passing a medical examin	easures that may be necessary for eligible applicants/employees to ation, and to skill and agility tests.)
Education	, Training, and Exp	perience	
School	Name and Address		No. of years Did you Degree or Completed Graduate? Diploma
High School	Name		Yes
	Address		
	City	State Zip	
College/ University	Name		Yes
	Address		<u> </u>
	City	State Zip	
Vocational/ Business	Name		Yes No
	Address		<u> </u>
	City	State Zip	
			skills that you feel make you especially Yes No
If so, pleas	se explain:		

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Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). You must complete this section even if attaching a resume.

			()	-	(-		
Name of Employer			Telephon	e No.	Fax N	lo.		
Type of Business			Your Sup	ervisor's Nam	ie			
Address & Street			City		Sta	ate Zip		
Dates of Employment:			·			1		
Dates of Employment.	From	To		E-mail addı	ress			
Your Position and Duties								
Reason for Leaving								
May we contact this em	ployer for a refere	ence?] Yes [No	
Name of Employer			_ () Telephon	e No.	()		
Type of Business			Your Sup	pervisor's Nam	ie			
Address & Street			City		Sta	ite Zip		
Dates of Employment:								
1 7	From	То		E-mail ad	dress			
Your Position and Duties								
Reason for Leaving								
May we contact this em	ployer for a refere	ence?				Yes [No	
			()		()			
Name of Employer			() . Telephon	e No.	Fax N	[o.		
Γype of Business		Your Sup	pervisor's Nam	ie				
Address & Street			City		Sta	ate Zip		
Dates of Employment:	From			E-mail addı	ress			
Your Position and Duties								
Reason for Leaving								
=	unlawan fan a naf	2229			г	J voc □	No	
May we contact this em	ipioyer for a refere	ence!	•••••	• • • • • • • • • • • • • • • • • • • •	∟	JYes ∟	No	

Employment Application - Long Form - Page 4 **Employment History Continued...** Name of Employer Telephone No. Type of Business Your Supervisor's Name Address & Street City State Zip Dates of Employment: То From E-mail address Your Position and Duties Reason for Leaving References List below three persons not related to you who have knowledge of your work performance within the last three years. First Name Last Name Address & Street City Occupation No. of Years Acquainted First Name Last Name City Address & Street Occupation No. of Years Acquainted

Last Name

City

No. of Years Acquainted

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First Name

Occupation

Address & Street

State Zip

Please 1	Read Carefully, Initial Each Paragraph and Sign Below
Initials	I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
Initials	I hereby authorize Hyder Property Management Professionals to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
Initials	I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between the Company and me. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.
Initials	Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Company, I am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.
	I waive receipt of a copy of any public record described in the paragraph above.
applicatio	this application, I further certify that I have read and understand everything contained in this n, including the at-will employment set forth above. Furthermore, I understand that I have the right with an attorney prior to executing this application.

Date

Applicant's Signature