



APPLICATION FOR EMPLOYMENT

Investment Property Associates, LLC, IPA Management, LLC, and IPA Management - Arizona, LLC (IPA) are equal opportunity employers and do not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability, or any other characteristic protected by law. Please complete the following in its entirety. Your application will remain active for consideration for 90 days.

General

Name: _____ Date: _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone: _____
Home Work

Position Desired: _____ Rate of Pay Expected: _____

Type of Employment Desired: Full-Time Part-Time Seasonal

Can you perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? _____

Will you work overtime if asked? _____ When will you be available to begin work? _____

Have you ever applied for employment with us before? _____ If so, when? _____

If hired, can you present evidence of your legal right to work in the U.S.? _____

Are you 18 years of age or older? _____ Have you ever been discharged or asked to leave a position? _____

If yes, explain: _____

Education

School	Name and Address of School	No. of Years Completed	Course of Study	Did you Graduate?	Degree or Diploma
High School	Name				
	Street Address				
	City, County, State, Zip				
College	Name				
	Street Address				
	City, County, State, Zip				
Business/ Trade	Name				
	Street Address				
	City, County, State, Zip				
Other	Name				
	Street Address				
	City, County, State, Zip				

Skills/Experience

Please write a short paragraph explaining any special skills or experience which you feel qualify you for the position for which you are applying. _____

Present and Past Employers (Begin with the most recent)

*Dates of
Employment*

*Positions Held - indicate major
responsibilities and accomplishments*

Employers

Name		From		To		
Street Address		MM	Y	MM	Y	
City	State	Zip				
County		Pay Rate				
Job Title		Start		Finish		
Telephone Number with Area Code	Email Address					
Immediate Supervisor		Work Status (Circle One):				
Reason for Leaving		Part-time Full-time Temporary				

Name		From		To		
Street Address		MM	Y	MM	Y	
City	State	Zip				
County		Pay Rate				
Job Title		Start		Finish		
Telephone Number with Area Code	Email Address					
Immediate Supervisor		Work Status (Circle One):				
Reason for Leaving		Part-time Full-time Temporary				

Name		From		To		
Street Address		MM	Y	MM	Y	
City	State	Zip				
County		Pay Rate				
Job Title		Start		Finish		
Telephone Number with Area Code	Email Address					
Immediate Supervisor		Work Status (Circle One):				
Reason for Leaving		Part-time Full-time Temporary				

Business/Professional References (Please list at least **three additional** people that you have worked with, other than supervisors listed above.)

Name		Name	
Street Address		Street Address	
City	State	Zip	City State Zip
County		County	
Telephone Number with Area Code	Email Address		Telephone Number with Area Code Email Address
Working Relationship (e.g. co-worker, subordinate, customer, supervisor, etc.)			

Name		Name	
Street Address		Street Address	
City	State	Zip	City State Zip
County		County	
Telephone Number with Area Code	Email Address		Telephone Number with Area Code Email Address
Working Relationship (e.g. co-worker, subordinate, customer, supervisor, etc.)			

Conviction Data Information

Have you ever been convicted of a felony, misdemeanor, or lesser crime? (Conviction will not necessarily disqualify an applicant.) _____ If yes, explain all convictions: when, where, and the nature of the offense _____

I understand that IPA conducts Criminal History background checks. IPA assures the confidentiality of this information. Failure to accurately and thoroughly disclose a criminal record may disqualify an applicant for employment, or if employed, may be grounds for dismissal. A record of a criminal conviction may also disqualify an applicant for employment, or if employed, may be grounds for dismissal.

Signature of applicant _____ Date _____

Carefully Read the Information Below Before Signing and Dating the Application

The information provided in this Application for Employment (and accompanying resume, if any) is true, correct, and complete. I understand that false information, misrepresentations, or omitted information may disqualify me for employment or, if employed, may result in my dismissal. I authorize the release of information that may be required to make an employment decision from present and past employers, educational institutions, appropriate law enforcement agencies, and all other relevant sources. I authorize my former employers and any educational institutions I have attended to disclose and discuss my employment/education history and records, including my disciplinary records, and waive any right to notice of such disclosure or discussion. All information (including information on an accompanying resume) is subject to verification. I also understand that if I have a qualified disability that affects my ability to do the job I seek, I may ask IPA to attempt to make a reasonable accommodation for it. I must make my request in writing to the Human Resources Director as soon as possible. I understand that acceptance of an offer of employment does not create a contractual obligation to continue to employ me in the future. If I become employed, my employment will be at-will and for no definite period of time. I understand that this means that my employment may be terminated by either IPA or me at any time, with or without cause, and with or without prior notice, warning, or discipline. No person other than the Chief Executive Officer (CEO) of IPA has the authority to offer employment for any specific period of time or to make any contract contrary to the foregoing. Moreover, no such agreement by the CEO will be enforceable unless it is in writing, pertains specifically to me, and is signed by myself and the CEO.

I HAVE CAREFULLY READ THE FOREGOING APPLICANT STATEMENT. I UNDERSTAND THIS APPLICANT STATEMENT AND AGREE TO EACH PROVISION SET FORTH IN THIS APPLICANT STATEMENT.

Signature of applicant _____ Date _____