Application for Employment

Please Print



Equal access to programs, services and employment is available to all persons. Those applications requiring reasonable accommodation to the application and/or interview process should notify a representative of our Business Office.

Name	Social	Security #	
Last Fi	irst Middl		
Address			
Street	City	State	Zip Code
Telephone # ()Mobile # (ss	
Position(s) applied for	Date of Application/	<u></u>	
Referral Source			
May we contact you at work Yes □ No	Type of employment desired:	Availability:	
If yes, work number and best time to call: () AM	□ Full-Time □ Part-Time	What days are you available to	o work?
PM	□ PRN	What shifts are you available	to work?
If under 18 and it is required, can you furnish a work permit? Yes □ No If no , please explain	Are you able to meet the attenda		n?
Have you submitted an application before? □ Yes □ No If yes, when?	Will you work overtime if require If no , please explain		
Are you legally eligible for employment in this country? Yes □ No	Driver's license number required applying: Number	I if driving is required for the job	
Date available for work / /	Answering "yes" to the following employment. Factors such as da violation, rehabilitation and posit	ate of offense, seriousness and r	nature of the
What is your desired salary range or hourly rate? \$Per	Have you ever pled "guilty" or "n	🗆 Yes 🗆 No	of a crime?

Employment History

Starting with your most recent employer, provide the following information:

Employer	Telephone #	‡	Dates employed : /	Year Month Year to /	
Street Address	City	State	Starting Salary	Ending Salary	
Starting job title / Final job title					
Immediate Supervisor and title	May we contact □ Yes □ No				
Why did you leave?					
Summarize the type of work performed an	d job responsibilities	5			
What did you like most about your position	1?				
What were the things you liked least about	t the position?				
Employer	Telephone #	‡	Dates employed : Month	rear Month Year to /	
Street Address	City	State	Starting Salary	Ending Salary	
Starting job title / Final job title					
Immediate Supervisor and title	May we contact □ Yes □ No				
Why did you leave?					
Summarize the type of work performed an	d job responsibilities	3			
What did you like most about your position	n?				
What were the things you liked least about	t the position?				
Employer	Telephone #	#	Dates employed : Month	Year Month Year to /	
Street Address	City	State	Starting Salary	Ending Salary	
Starting job title / Final job title					
Immediate Supervisor and title	May we contact				
Why did you leave?					
Summarize the type of work performed an	d job responsibilities	3			
What did you like most about your position	1?				
What were the things you liked least about	t the position?				

Employment Hist	tory (continued)					
Explain any gaps in your employment, other than those due to personal illness, injury or disability.						
If not addressed or	n previous page, have you ev	ver been fired or asked to	resign from a job? □ Yes □ No	0		
If yes , please	explain					
Skills and Qualific	cations					
	ecial training, skills, licenses		ay assist you in performing the	e position for which you are		
Computer Skills (check appropriate boxes. Inc	Llude software titles and yo	ears of experience.)			
□ Word Process	ingYears:	□ Internet	Years:			
 Presentations 	Years: Years:	_ Other	Years:			
	Years:	□ Other				

Educational Background

Starting with your most recent school attended, provide the following information.

School (Include City/State)	Years	Completed	GPA	Major / Minor
		□ Diploma □ GED		
		□ Degree □		
		Certification		
		□ Other		
		□ Diploma □ GED □ Degree □		
		Certification		
		□ Other		
		□ Diploma □ GED		
		□ Degree □		
		Certification		
		□ Other		
		□ Diploma □ GED		
		□ Degree □		
		Certification		
		□ Other		

References

List the names and telephone numbers of three business / work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references that are not related to you.

Title	Relationship	Telephone	Years Known
	Title	Title Relationship	Title Relationship Telephone

Related Information

To what job-related organizations (professional, trade, etc.) do you belong? Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran / reserve National Guard or any similarly protected status.

Organization	Office Held

List special accomplishments, publications, awards, etc.

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran / reserve National Guard or any similarly protected status.

In your current or pri	or job, have you ever written instructions or directions to be followed by employees or customers?
□ Yes □ No □ N/A	If yes , please explain
Is there any job – re	elated information you want us to know about?

Applicant Statement I certify that all the information I have provided in order to apply for and secure work with this employer is true, complete and accurate.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information

from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non – defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

Revised 2/20/2020

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out another application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's Administrator.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

certify that I have read, fully understand and accept all terms of	the foregoing /	Applicant	Statement.
Signature of Applicant	Date	1	1

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.