



## APPLICATION FOR EMPLOYMENT

All applicants are considered for all positions without regard to race, religion, color, sex, gender identity, sexual orientation, pregnancy, age, national origin, ancestry, physical or mental disability, medical condition, military or veteran status, genetic information, marital status, ethnicity, citizenship or immigration status or any other protected classification, in accordance with applicable federal, state, and local laws. Equal access to programs, services, and employment is available to all qualified persons. Those applicants requiring accommodation to complete the application and/or interview process should contact a management representative. Please print.

Position(s) Applied for		Date of Application		
Print Name (Last, First, & Middle)				
Street Address		City	State	ZIP Code
Primary Phone Number	Alternate Phone Number	Email		

### GENERAL INFORMATION

1. Have you ever used another name?..... Yes  No
2. Is any additional information relative to name changes, use of an assumed name, or nickname necessary to enable a check on your work and educational record?..... Yes  No  
 If yes to either of the above, provide the additional information:  
 \_\_\_\_\_
3. Have you ever worked for this company before?..... Yes  No  
 If yes, give dates and position: \_\_\_\_\_
4. On what date are you available to begin work? \_\_\_\_\_
5. Are you available to work?      Full-time    Part-time    Shift Work    Temporary
6. Days and hours you are available to work: \_\_\_\_\_
7. If hired, would you have a reliable means of transportation to and from work?..... Yes  No
8. Are you at least 18 years old? ..... Yes  No  
 Note: If under 18, hire is subject to verification that you are of minimum legal age.
9. If hired, can you present evidence of your identity and legal eligibility to work in this country?  Yes  No
10. Are you able to perform the essential job functions of the job for which you are applying with or without reasonable accommodation?..... Yes  No  
 Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for qualified applicants/employees to perform essential job functions.

**EDUCATION**

	School Name	Years Completed	Diploma/ Degree (Yes/No)	Degree Earned	Area of Study/Major
High School					
College/ University					
Graduate School					
Trade School					

**EMPLOYMENT EXPERIENCE**

Please provide information about your present or previous employers in chronological order with present or most recent employer listed first. You may also attach a current resume to provide more details.

Name of Employer	Supervisor	May we contact?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address		
Phone Number	Dates Employed (Month/Year)	
	From	To
Job Title and Duties	Reason for Leaving	

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	From	To
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List any other experience, job related skills, additional languages, or other qualifications that you believe should be considered in evaluating your qualifications for employment.

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**BUSINESS AND PROFESSIONAL REFERENCES**

List three professional references of individuals who are not related to you:

Name and Title	Relationship	Phone Number and Email

**APPLICANT STATEMENT AND AGREEMENT**

I hereby certify 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.

I hereby authorize the Community House to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to the Community House 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 Community House, 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.

If hired, I understand and agree that my employment with the Community House is at-will, and that neither I, nor the Community House is required to continue the employment relationship for any specific term. I further understand that the Community House or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.

If I am employed by the Community House, I understand that I am required to comply with all rules and regulations of the Community House.

**MY SIGNATURE INDICATES THAT I HAVE READ, UNDERSTAND, AND AGREED TO ALL OF THE ABOVE TERMS.**

Signature: \_\_\_\_\_

Name (print): \_\_\_\_\_ Date: \_\_\_\_\_