

APPLICATION FOR EMPLOYMENT

Applicants are considered for all positions without regard to race, creed, color, ancestry or national origin, sex, age, sexual orientation, marital or parenthood status, disability, economic status, arrest or conviction record, military reserve membership, use or nonuse of lawful products away from work, or any other legally protected status.

PLEASE PRINT (use ink or type)

Date of Application _____

Position(s) Applied For _____

Desired Salary (OPTIONAL) _____

Name _____
Last First Middle

Address _____
Number Street City State Zip Code

Telephone (_____) _____ Email Address _____

If necessary, the best time to call you at home is _____

May we contact you at work Yes No If yes, give the best time to call _____

If you are offered a position and you are under 18, can you furnish a work permit? Yes No

Have you filed an application here before? Yes No If yes, give date _____

Have you ever been employed here before? Yes No If yes, give date _____

Are you employed now? Yes No

May we contact your present employer? Yes No

Do you have the legal right to work in the United States? Yes No
(The Immigration Reform and Control Act of 1986 requires employers to verify the legal status and right to work of all new hires. Verification must be obtained after the decision to hire has been made.)

On what date would you be available for work? _____

Are you available to work Full-Time Part-Time Shift Work Temporary

Can you travel if a job requires it? Yes No

Do you have a valid driver's license? Yes No If yes, which State? _____

Do you have proof of auto insurance? Yes No

Veteran of the U.S. Military service? Yes No

Military skills/training obtained _____

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex, ancestry or national origin, or other protected status.

Employer	Telephone ()	Dates Employed From To		Summarize Work Performed and Job Responsibilities
Address				
Job Title		Hourly Rate/Salary (OPTIONAL)		
Supervisor		<u>Start</u>	<u>Final</u>	
Reason for Leaving				
May we Contact for Reference? Yes No Later				
Employer	Telephone ()	Dates Employed From To		Summarize Work Performed and Job Responsibilities
Address				
Job Title		Hourly Rate/Salary (OPTIONAL)		
Supervisor		<u>Start</u>	<u>Final</u>	
Reason for Leaving				
May we Contact for Reference? Yes No Later				
Employer	Telephone ()	Dates Employed From To		Summarize Work Performed and Job Responsibilities
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Address				
Job Title		Hourly Rate/Salary (OPTIONAL)		
Supervisor		<u>Start</u>	<u>Final</u>	
Reason for Leaving				
May we Contact for Reference? Yes No Later				

If you need additional space, please continue on a separate sheet of paper.

Comments:

EDUCATION

	High School	College/University	Graduate/ Professional
School Name			
Years Completed/Degree (circle appropriate year)	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree			
Describe Course of Study			
Describe specialized training, apprenticeship, skills, and extracurricular activities			

Honors Received _____

Have you had any other job related training? Yes No
If so, please describe:

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience:

List professional, trade, business, or civic activities and offices held. (You may exclude those which indicate race, color, religion, sex, ancestry or national origin, or other protected status.)

State any additional information you feel may be helpful to us in considering your application:

REFERENCES

Give name, address, and telephone number of three (3) references who are not related to you and are not previous employers.

NAME	ADDRESS	PHONE NUMBER

Are you related to any member of the Workforce Connections, Inc. Board of Directors? Yes No

If so, whom? _____
(A list of Board of Director members can be supplied upon request.)

How did you hear about this position?

APPLICANT'S STATEMENT

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the Workforce Connections, Inc. service if I have been employed. Furthermore, I understand that just as I am free to resign at any time, Workforce Connections, Inc. reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of Workforce Connections, Inc. has the authority to make any assurances to the contrary.

I give Workforce Connections, Inc. the right to investigate all references and to secure additional information about me, if job related. I give Workforce Connections, Inc. the right to investigate my criminal record, understanding that a criminal record is not necessarily a restriction to employment, as convictions will be considered only if they are substantially related to this particular job. I hereby release from liability Workforce Connections, Inc. and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information.

Workforce Connections, Inc. is an equal employment opportunity/affirmative action employer. Workforce Connections, Inc. does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, State, or Federal law.

Signature of Applicant _____ Date _____

Equal Opportunity Employer/Program

Auxiliary aids and services are available upon request to individuals with disabilities

TTY users: 1-800-947-3529