

# APPLICATION FOR EMPLOYMENT

*We are an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, color, age, sex, religion, disability, or national origin.*

APPLICANT INFORMATION										DATE:		
Last Name						First				M.I.		
Street Address							Apartment/Unit #					
City					State			ZIP				
Phone (s)					E-mail Address							
Date Available				Driver's License #/State				Desired Salary	\$			
POSITION APPLIED FOR										18 or Over? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?									
Are you employed now?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, may we contact your employer?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Type of Employment	Full-time <input type="checkbox"/>		Part-time <input type="checkbox"/>		Summer <input type="checkbox"/>		Temporary <input type="checkbox"/>					
Are you currently under indictment for a crime?	YES <input type="checkbox"/>		NO <input type="checkbox"/>									
Have you ever been arrested for a Felony, a Class A misdemeanor, Class C misdemeanor or have you ever been court martialled?	YES <input type="checkbox"/>		NO <input type="checkbox"/>									
Have you been convicted in any court of a misdemeanor crime of domestic violence?	YES <input type="checkbox"/>		NO <input type="checkbox"/>									
Are you an unlawful user of a controlled substance or addicted to an controlled substances?	YES <input type="checkbox"/>		NO <input type="checkbox"/>									
Have you ever been adjudicated as a mental defective or been committed to a mental institution?	YES <input type="checkbox"/>		NO <input type="checkbox"/>									
EDUCATION AND OFFICE SKILLS												
High School					Address							
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>							
College or Trade School					Address							
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree						
Years of Typing Experience			Words Per Minute			Other Office Equipment Used	Printer <input type="checkbox"/>	Copier <input type="checkbox"/>	Fax <input type="checkbox"/>	Scanner <input type="checkbox"/>	Calculator <input type="checkbox"/>	
Computer Software and Hardware Experience												
EMPLOYMENT HISTORY (LIST PRESENT OR MOST RECENT POSITIONS FIRST)												
Company							Phone					
Address						Name and Position of Supervisor						
Job Title					Starting Salary	\$	Ending Salary	\$				
Responsibilities												
From	To	Reason for Leaving										
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>		NO <input type="checkbox"/>									

Date of Criminal History Check: \_\_\_\_\_

Verified by: \_\_\_\_\_



EMPLOYMENT HISTORY (CONTINUED)						
Company				Phone		
Address				Name and Position of Supervisor		
Job Title			Starting Salary	\$	Ending Salary	
Responsibilities						
From		To		Reason for Leaving		
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Company				Phone		
Address				Name and Position of Supervisor		
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From		To		Reason for Leaving		
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Military Service						
Branch				From		
Rank at Discharge			Type of Discharge		Ending Salary	\$
If other than honorable, explain						
Reason for Leaving						
Disclaimer and Signature						
<p><b>I certify that the facts contained in this application are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my interview may result in my immediate release.</b></p> <p>I understand that employment is conditional on a background check and criminal history check. I authorize Fort Clark Springs Association, Inc. to thoroughly investigate all statements contained in my application or resume. I authorize my former employers and references to disclose information regarding my former employment, character and general reputation. I release FCSA, any former employer, and all references from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.</p> <p>I understand and agree that nothing contained in this application or conveyed during any interview is intended to create an employment contract. I understand by filling out this form does not indicate there is a position open and does not obligate FCSA to hire. If hired my employment will be "at will" and I agree to abide by all FCSA rules, regulations, policies and procedures.</p>						
Signature				Date		
REFERENCES						
Please list three references.						
Name				Phone		
Relationship				How long have you known this person?		
Name				Phone		
Relationship				How long have you known this person?		
Name				Phone		
Relationship				How long have you known this person?		

