EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Name (Last)	First	(Middle)	Date
Home Address	City	State	Zip
Home Telephone ( )	Cellular Phone ( )	Business Phone ( )	May we contact you at work? ☐ Yes ☐ No
E-mail			

Position Applying For

Date Available / /

Are you interested in (check all that apply) ☐ Full-time ☐ Part-time ☐ Temporary ☐ Internship

Days and hours available

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
From							
To							

Are you willing to relocate? ☐ Yes ☐ No

Are you 18 years or older? ☐ Yes ☐ No

(no one under age 15 may be hired)

How were you referred to us?

EDUCATION

Type of School	Name and Location of School			Degree/Area of Study	Number of Years Attended	Graduated (Check One)
High School	Name	Address				☐ Yes ☐ No
	City	State	Zip			
College	Name	Address				☐ Yes ☐ No
	City	State	Zip			
Graduate School	Name	Address				☐ Yes ☐ No
	City	State	Zip			
Other	Name	Address				☐ Yes ☐ No
	City	State	Zip			

U.S. MILITARY SERVICE

Branch of Service	Technical Specialization	Rank Attained

LEGAL

Are you legally authorized to work in the United States? ☐ Yes ☐ No (Identity and employment eligibility of all new hires will be verified as required by the Immigration Reform and Control Acts of 1986.)

Were you ever discharged by any company? ☐ Yes ☐ No If yes, give name of company(ies) _____

Reason for discharge _____

Have you ever been convicted of or plead guilty to (including a plea of no contest) a misdemeanor at any time within the past 7 years? ☐ Yes ☐ No If yes, please explain in full:

Have you been convicted of or plead guilty to (including a plea of no contest) a felony (you are not obligated to disclose sealed, erased or expunged records of conviction(s) or records of arrests or criminal charges which did not result in a conviction)? ☐ Yes ☐ No If yes, please explain offense and final disposition:

(A conviction will not necessarily disqualify an applicant from employment. However, a background check will be required for all employed personnel.)

Federal, State, and local laws prohibit discrimination based on race, color, sex, religion, affectional or sexual orientation, national origin, ancestry, age, physical or mental disability that does not affect ability to perform essential job function(s) with or without reasonable accommodation, or any other protected status not listed in this statement. Your application will be considered in full accord with applicable Federal, State, and local requirements.

EMPLOYMENT HISTORY

List employment starting with your most recent position. You may include a description of verified work performed on a volunteer basis. Is any additional information relative to a different name necessary to check your work record?
If yes, explain. ☐ Yes ☐ No

DATES	NAME AND ADDRESS OF EMPLOYER	POSITION HELD AND SUPERVISOR	LIST MAJOR DUTIES	SALARY OR WAGES	REASON FOR LEAVING
From: / mo. yr. To: / mo. yr.	Name Address City & State Phone	Your Job Title Supervisor	(If more space is needed, can list on your attached resume.)	Starting Final	
From: / mo. yr. To: / mo. yr.	Name Address City & State Phone	Your Job Title Supervisor		Starting Final	
From: / mo. yr. To: / mo. yr.	Name Address City & State Phone	Your Job Title Supervisor		Starting Final	
From: / mo. yr. To: / mo. yr.	Name Address City & State Phone	Your Job Title Supervisor		Starting Final	

PROFESSIONAL & TECHNICAL INFORMATION - To Be Completed for Licensed/Registered Positions

Texas Registration No.	Expiration Date	Certificate No.	Expiration Date
If not licensed in Texas, have you applied? ☐Yes ☐No		If licensed in another state, list:	

CLERICAL SKILLS - To Be Completed for Administrative Positions

Typing, WPM		Microsoft Office ☐Yes ☐No	Microsoft Outlook ☐Yes ☐No
Shorthand, WPM			

List Specific Computer Skills –

OTHER SPECIAL SKILLS - List Other Specific Skills You Have to Offer for This Job Opening:

(CONTINUED ON NEXT PAGE)

REFERENCES

Business references: (do not list relatives)				
Name	Address	Work Phone No.	Title	Years Known

PLEASE READ CAREFULLY

The purpose of this notice is to inform you that we will be conducting a pre-employment background check in conjunction with your application for employment with our company. This background check may involve verifying or reviewing any relevant information pertaining to the position you are seeking.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate dismissal. I understand, also, that I am required to abide by all rules and regulations of Family Life and Community Resource Center.

I understand and agree that if employed, employment will be "AT WILL." That is, either I or the employer may end the employment relationship at any time, for any reason, or for no reason. I understand that receipt of this application does not imply employment and that this application and/or any other documents are not contracts of employment.

APPLICANT'S SIGNATURE (Please type name)

DATE SIGNED