

EMPLOYMENT APPLICATION



An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, or disability. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job-related factors.

No action can be taken on this application until all questions have been answered FULLY and ACCURATELY. Please print clearly.

Name		Date		
Address				
Str	reet	City		te Zip
	Cell Phone			
If filred, call you full	nish proof you are eligible to work in	the U.S.? Lies Lino	Are you over 10 ye	ears old? □Yes □ No
POSITION APPLIE	ED FOR			
Waş	ge or salary desired? \$	When can you st	art?	
Are you currently er	mployed? □ Yes □ No May we	e contact your present employ	yer? □ Yes □ No	
•	you expect to be engaged in any othe	- ·		_
In order to permit a cyou previously used	check of your work and education re? Yes No If yes, identify	ecords, should we be made averame (s) and relevant dates.	ware of any change of n	name, assumed name that
	of this opening?			
Do you have relative	es that are currently employed by this	s agency?		
Have you worked he	ere before? Yes No If yes, when	n	Why did you leave? _	
Are you willing to w	vork flexible hours as required? □Ye	es □ No		
Are there any hours,	shifts or days you cannot or will not	t work?		
-				
Have you ever been	convicted of any law violation (exce ant for employment.) If yes, describe	ept minor traffic violation)? [□Yes □ No (Conviction	on will not necessarily
	NAME & LOCATION OF SC	No. of Year completed. D you graduate	Oid study/	DIPLOMA/ DEGREE
High School				
College/Univ.				
College/Univ.				
Other Training/Edu	acation/Skills:			



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Most Recent Employer	Address	Telephone				
Dates of Employment (Month/Year) From: To:	Starting Position	Position on Leaving				
Salary Start: End:	Description of Duties					
Name & Title of Supervisor	Reason for Leaving					
Previous Employer	Address	Telephone				
Dates of Employment (Month/Year) From: To:	Starting Position	Position on Leaving				
Salary Start: End:	Description of Duties					
Name & Title of Supervisor	Reason for Leaving					
Previous Employer	Address	Telephone				
Dates of Employment (Month/Year) From: To:	Starting Position	Position on Leaving				
Salary Start: End:	Description of Duties	Description of Duties				
Name & Title of Supervisor	Reason for Leaving	Reason for Leaving				
REFERENCE LIST Please provide 1 personal and 2 professional references (not related to you). Must have known references for at least 3 years.						
Name	Phone	Relationship				
APPLICANT'S CERTIFICATION AND AGREEMENT – PLEASE READ CAREFULLY BEFORE SIGNING						
I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statement(s), omissions or misrepresentations may result in my dismissal. I authorize the Company to make an investigation of any of the facts set forth in this application.						
I understand that employment at this Company is "at will", which means that either I or the Company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. I understand that acceptance of an offer of employment does not create a contractual obligation upon Big Brothers Big Sisters of Northeast Indiana, Inc., to continue to employ me in the future.						
I understand that an offer of employment is contingent upon negative findings from State Police Criminal History Investigation, verification of education/degree(s), a Drug and Alcohol test, and an occupational physical examination.						
Date	Applicant's Signature Printed Name: This application for employment will remain active for a limited time.					
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