

Application For Employment



The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information

Name

Address

City

State

Zip

Phone Number

Email Address

Are you legally eligible to work in the US?

Yes

No

Are you a Veteran?

Yes

No

If selected for employment are you willing to submit to a background & motor vehicle check?

Yes

No

Position

Position You Are Applying For

Available Start Date

Desired Pay

Employment Desired

Full Time

Part Time

Substitute / Call List

Shift Availability

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							
Overnight							

Education

School Name	Location	Years Attended	Degree Received	Major

References

Name	Title	Company	Phone

Employment History

Employer (1)	Job Title		Dates Employed
Work Phone			
Address	City	State	Zip
Employer (2)	Job Title		Dates Employed
Work Phone			
Address	City	State	Zip
Employer (3)	Job Title		Dates Employed
Work Phone			
Address	City	State	Zip

Have you ever been fired or asked to resign from a job? Yes No Please explain:

Applicant Statement

I certify that all the information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all the references, employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me to this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking and gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purposes of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete and I-9 Form in this regard.

I understand that any information provided by me that is to be found false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICATION STATEMENT

I certify that I have read, fully understand and accept all terms of the foregoing Application Statement.

Signature of Applicant

Date

RETURN COMPLETED APPLICATION AND RESUME TO: bgilleylen@starsfamilyservices.org