

APPLICATION FOR EMPLOYMENT

All applicants will be considered for employment without regard to race, color, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected status. We are an Equal Opportunity Employer.

Name: _____ Date: _____

Address: _____

Telephone : (____) _____ 2nd # : (____) _____

Soc. Sec. #: _____

Referred by: Advertisement Employment Agency Friend/Relative

If you are under 18 years of age, can you provide required proof of your eligibility to work?
Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Importation status? Yes No

Position(s) applied for: _____ Full Time or Part Time

Are you currently employed? Yes No

May we contact your present employer? Yes No

Date you are available to start work: _____ Salary/wages desired: \$ _____ per hour

Have you worked for Meeker County Community Homes before? Yes No
If yes, when? _____

Have you been convicted of a felony within the last 7 years? Yes No

EDUCATION:

Name and location of school, course of study completed, Diploma/degree:

High School: _____ # of years _____

College: _____ # of years _____ Major _____ Minor _____

Other schooling: _____

Indicate special qualifications or skills: _____

EMPLOYMENT EXPERIENCE

Start with your present or last job. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1. Employer: _____ Address: _____
City: _____ State: _____ Zip: _____
Telephone #: _____ Dates Employed: _____ to _____
Work Performed: _____ Job title: _____
Supervisor: _____ Hourly Rate/Salary: _____
Reason for Leaving: _____

2. Employer: _____ Address: _____
City: _____ State: _____ Zip: _____
Telephone #: _____ Dates Employed: _____ to _____
Work Performed: _____ Job title: _____
Supervisor: _____ Hourly Rate/Salary: _____
Reason for Leaving: _____

3. Employer: _____ Address: _____
City: _____ State: _____ Zip: _____
Telephone #: _____ Dates Employed: _____ to _____
Work Performed: _____ Job title: _____
Supervisor: _____ Hourly Rate/Salary: _____
Reason for Leaving: _____

List professional, trade, business or civic activities and offices held.

You may exclude membership that would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

ADDITIONAL INFORMATION

Other Qualifications: summarize special job-related skills and qualifications acquired from employment or other experience.

SPECIALIZED SKILLS: Check Skills/Equipment Operated

____ Calculator

Computer: _____

REFERENCES

1. _____
NAME PHONE

ADDRESS CITY STATE ZIP

2. _____
NAME PHONE

ADDRESS CITY STATE ZIP

3. _____
NAME PHONE

ADDRESS CITY STATE ZIP

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

Signature of Applicant

Date

FOR OFFICE USE ONLY:

HIRE DATE: _____

STARTING WAGE: _____

JOB TITLE: _____

YEARS OF EXPERIENCE: _____