

**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 : (\_\_\_\_\_) \_\_\_\_\_ 2<sup>nd</sup> # : (\_\_\_\_\_) \_\_\_\_\_

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? \_\_\_\_\_

**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: \_\_\_\_\_

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**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

**DISCLAIMER: All applicants are subject to a background study. MCCH is not permitted to hire employees who are disqualified from working because of their past criminal history.**

**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: \_\_\_\_\_