

11/2013

DATE OF APPLICATION:	

APPLICATION FOR EMPLOYMENT

Applications must be completed in full, even when accompanied by a resume. Any misrepresentation or falsification, intentional or unintentional, of information on this application may result in denial of employment or termination.

Main Street Community Center is an Equal Opportunity Employer.

PERSONAL Name:		Ema	ail Address:			
Address:		Telephone #:				
City: 5	ST: Zip:	Alternate Telephone #:				
Position Applied For:			Starting Salary Desired:			
Full-Time Part-Time If Part-Time, please specify days and hours available:						
Referred by:						
EDUCATION						
			Course of Study	# of Years Completed	Diploma/Degree Rec'd	
High School: (Name & Location)						
College: (Name & Location)						
Other: (Military, Professional License, Certification)						
EMPLOYMENT HISTORY Please list in chronological order beginning with current or most recent position.						
Employed (MO/YR) From: To:	Employer:	Address: P		Phone #:	Phone #:	
Job Title:	Job Duties & Responsibilities:	Salary Start: End: Reason for Leaving:		Leaving:		
Type of Business:		Supervisor's Name & Job Title:				
May we contact your current employer? YES NO						

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	ed (MO/YR)	Employer:	Address:		Phone #:
From:	То:				
Job Title	2:	Job Duties & Responsibilities:	Salary Start:	End:	Reason for Leaving:
Type of	Business:		Supervisor's Name	e & Job Title:	
	ed (MO/YR)	Employer:	Address:		Phone #:
From:	То:				
Job Title	::	Job Duties & Responsibilities:	Salary Start:	End:	Reason for Leaving:
Type of	Business:	-	Supervisor's Name	e & Job Title:	<u> </u>
	1 (2.2.6.12.)	Τ= ,	1		I -, ,,
Employe From:	ed (MO/YR) To:	Employer:	Address:		Phone #:
Job Title	2:	Job Duties & Responsibilities:	Salary Start:	End:	Reason for Leaving:
Type of	Business:		Supervisor's Name	e & Job Title:	
		se include any additional information inclu			skills, computer experience, languages
spoken, q	ualifications or training which y	you believe should be considered in evalud	ating your qualifications fo	or employment):	
DEDCO	NAL DATA				
PERSU	NAL DATA				
1.		ble to work in the United States?			YES NO
		roof of your authorization to work in the L three (3) days of employment.	Inited States. If hired, you	u will be required to	o provide proof of your identity and
	- p - p	(-))))			
2.	Have you ever been con	nvicted of a felony?			YES NO
	If yes, please explain:				
	Note: A conviction will not co	onstitute an automatic bar to employment	÷.		
3.	Have vou ever been ter	minated from or resigned in lieu	of termination from	a iob?	YES NO
 Have you ever been terminated from or resigned in lieu of termination from a job? If yes, please describe the situation: 					
	Note: A response of "ves" will	I not necessarily bar you from employmen	t. Each case will be iudae	ed on its own merit	with

Note: A response of "yes" will not necessarily bar you from employment. Each case will be judged on its own merit wit respect to time, circumstances, seriousness, and the position for which you are applying.

4.	Have you ever previously applied for a posit If yes, please list what position and when yo	unity Center? Yf	ES NO		
5.	Are any of your relatives employed by Main Street Community Center? YES NO If yes, please list name(s) and relationship(s):				
REFER Please I	ENCES ist the names of three persons not related to	you, whom you have known	for at least one year.		
	NAME	PHONE NUMBER	BUSINESS	YEARS KNOWN	
	IDATE AGREEMENT read each section carefully.				
It is my unbenefits b	EMPLOYMENT inderstanding that this employment application, or the grow this organization. I understand and agree that my emperminated, with or without cause, at any time by either m	oloyment will be at-will in nature ι			
I certify th	ATION OF TRUTH AND ACCURACY nat the information in this application is true, complete a shall be sufficient cause for denial of employment or disc		e answers, statements, or significa	nt omissions made by me on	
Lundersta	TION AND AUTHORIZATION TO REQUIRE A DRUG SCREEN and that I may be required to undergo a pre-employment and that I do not have to participate but that my refusal v	t drug screen and medical exam by	•		
I understa	TION AND AUTHORIZATION TO CONDUCT BACKGROUND and that I may be subject to a background check and here blic, private, criminal, internal or confidential in nature, to lamed in my application from all liability for any damages	eby authorize Main Street Commu o determine any and all informatio	on of concern as to my record or no	•	
vehicle re informati	ally, you are hereby authorized to make any investigation cord, criminal record and credit history directly or through the appropriate agencies to the investigating party hat may be required.	gh an investigative or credit agenc	y bureau of your choice. I authoriz	ze the release of this	
	and that passing the background check is a condition of e me and I have been hired.	employment. A negative backgrou	nd check can be grounds for dismi	ssal, even if an offer has been	
Signat	ure:		Date:		