

## **Application for Employment**

## **Personal Information**

Full Legal Name						
Last Name Fir		First N	First Name		Middle Initial	
Preferred Name		Preferred Pronouns				
Present Address						
Street Address						
City	Stat			Zip		
Previous Address						
Street Address City	Stat	<u> </u>		7in		
-	State			Zip		
Home Phone			Alternate Phone			
Cell Phone		Social Security Number				
Are you 18 years or older? Yes  No						
Are you legally eligible for employment in the U.S.? Yes □ No □						
Any restrictions that would prohibit you from performing certain jobs or duties? Yes \( \sqrt{\omega} \) No \( \sqrt{\omega}						
If Yes, please describe in full:						
Have you ever been convicted of a crime? Yes □ No □						
If Yes, please describe in full:						
Education						
Type of School	Name of School	Locatio	n (address)	Years Completed	Major and Degree	
High School						
Business/Trade School						
College						
Other Education						

**Equal Opportunity Employment** 

CSA is dedicated to providing equal employment and advancement opportunities. It is our policy to provide equal employment opportunities to all individuals based upon job-related qualifications, and the requirements of each position, without regard to age, sex, pregnancy, race, color, religion, creed, national origin, disability, sexual orientation, gender identity, genetic information, military service, or any other legally-protected characteristic, and to maintain an environment free from harassment based upon these grounds.



**Position Applying For** 

Position Desired	Employment Desired					
1 osition besides	Full Part Temp					
_	Tull Fait   Temp					
Area of Interest						
Days Available to Work (check all available) M □ T □ W □ T □ F □ Sa □ Su □						
Are there hours you cannot work?						
Salary Desired:						
Date available to begin work						
Have you ever applied with CSA before? Yes □ No □						
If Yes, when?						
Were you interviewed? Yes □ No □						
List any additional skills and knowledge that relates to your ability to perform the job for which you						
are applying (such as license, professional mem	berships, computer knowledge and special interest)					
List any job-related information that you feel may help us in considering you for the position you						
are applying. (Examples: What are your career						
company? Have you held positions in the community you feel have transferable skills)						
tompany. There you not a position on the commandy you job nave transjeration states						



**Employment History** *Please list all work experience starting with your most current employer.* 

Company Name	Position				
Address					
Description of Duties					
Supervisor/Manager	Bhana				
May we contact them? Yes □ No □	Phone				
Starting Salary	Ending Salary				
Dates of employment From: To:					
Reason for Leaving					
Company Name	Position				
Address					
Description of Duties					
Supervisor/Manager					
	Phone				
May we contact them? Yes ☐ No ☐					
Starting Salary	Ending Salary				
Dates of employment From: To:					
Reason for Leaving					
Company Name	Position				
Address					
Description of Duties					
Supervisor/Manager					
	Phone				
May we contact them? Yes $\square$ No $\square$					
Starting Salary	Ending Salary				
Dates of employment From: To:					
Reason for Leaving					



**References** List three people not related to you whom you have known at least one year. At least two of them should be professional references

Name	Contact Phone				
Address					
Relationship	Years Known				
Name	Contact Phone				
Address					
Relationship	Years Known				
Name	Contact Phone				
Address					
Relationship	Years Known				
Authorization Please read and understand this statement before signing your application  I certify that the facts contained in this application are true and complete to the best of my knowledge. I further understand that, if employed, falsified statements on this application shall be grounds for dismissal I authorize investigation of all statements contained herein. I release from any and all liability all the references and employers listed above who provide information concerning my previous employment and any other information, personal or otherwise, to Community Support Advocates.  This application will expire in 6 months. After that date, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.  This application is not an employment agreement. If I accept an offer of employment, I understand that the employer or employee may terminate such employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than an Executive Director of the employer, has the authority to enter into an employment agreement with terms contrary to the					
foregoing and then only in writing signed by such director.  I fully understand and accept all terms and conditions in the above listed statement					

\*A facsimile or electronic signature on this document shall have the same effect as an original.

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Signature\*

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**Date**