



## Application for Employment

### Personal Information

Full Legal Name		
Last Name	First Name	Middle Initial
Preferred Name		Preferred Pronouns
Present Address		
Street Address		
City	State	Zip
Previous Address		
Street Address		
City	State	Zip
Home Phone		Alternate Phone
Cell Phone		Social Security Number
Are you 18 years or older? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Are you legally eligible for employment in the U.S.? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Any restrictions that would prohibit you from performing certain jobs or duties? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If Yes, please describe in full:		
Have you ever been convicted of a crime? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If Yes, please describe in full:		

### Education

Type of School	Name of School	Location (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.





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

<b>Company Name</b>		<b>Position</b>
<b>Address</b>		
<b>Description of Duties</b>		
<b>Supervisor/Manager</b>		<b>Phone</b>
May we contact them? Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>Starting Salary</b>		<b>Ending Salary</b>
<b>Dates of employment From:</b>		<b>To:</b>
<b>Reason for Leaving</b>		
<b>Company Name</b>		<b>Position</b>
<b>Address</b>		
<b>Description of Duties</b>		
<b>Supervisor/Manager</b>		<b>Phone</b>
May we contact them? Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>Starting Salary</b>		<b>Ending Salary</b>
<b>Dates of employment From:</b>		<b>To:</b>
<b>Reason for Leaving</b>		
<b>Company Name</b>		<b>Position</b>
<b>Address</b>		
<b>Description of Duties</b>		
<b>Supervisor/Manager</b>		<b>Phone</b>
May we contact them? Yes <input type="checkbox"/> No <input type="checkbox"/>		
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<b>Dates of employment From:</b>		<b>To:</b>
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**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*

<b>Name</b>	<b>Contact Phone</b>
<b>Address</b>	
<b>Relationship</b>	<b>Years Known</b>

<b>Name</b>	<b>Contact Phone</b>
<b>Address</b>	
<b>Relationship</b>	<b>Years Known</b>

<b>Name</b>	<b>Contact Phone</b>
<b>Address</b>	
<b>Relationship</b>	<b>Years Known</b>

**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**

\_\_\_\_\_  
**Signature**\*

\_\_\_\_\_  
**Date**

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

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