

CommPar Application



Application for Employment

(Please
Print)

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

Position(s) Applied For	Date of Application
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How did you learn about us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____

Last Name	First Name	Middle Name
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Address	Number	Street	City	State	Zip
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Telephone Number(s)	Social Security Number / /
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If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes___ No___

Have you ever filed an application with us before? Yes___ No___
If Yes, give date _____

Have you ever been employed with us before? Yes___ No___
If Yes, give date _____

Are you currently employed? Yes___ No___

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes___ No___
Proof of citizenship or immigration status will be required upon employment

On what date would you be available for work? _____

Are you available to work: Full Time ___ Part Time ___

Are you currently on "lay-off" status and subject to recall? Yes___ No___

Can you travel if a job requires it? Yes___ No___

Have you been convicted of a felony within the last 7 years? Yes___ No___
Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

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Education

	Elementary School	High School	College	Graduate
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma / Degree				
Describe Course of Study				
Describe any specialized training, apprenticeship, skills, etc.				
Describe any honors you have received				
State any other information you feel may be helpful in considering your application				

Indicate any Foreign languages you can speak, read or write			
SPEAK	FLUENT	GOOD	FAIR
READ	FLUENT	GOOD	FAIR
WRITE	FLUENT	GOOD	FAIR

List professional, trade, business or civic activities and offices held.
 You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status.

References

Give name, address and telephone number of three references who are not related to you and are not previous employers

1. _____

2. _____

3. _____

Have you ever had any job-related training in the United States Military? Yes ___ No ___

If yes, please describe _____

Are you physically or otherwise unable to perform the duties of the job for which you are applying? Yes ___ No ___

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Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status. (If you need additional space, add a separate sheet of paper)

Employer		Dates Employed From To	Work Performed
Address			
Phone			
Job Title	Supervisor	Pay Rate / Salary Starting / Final	
Reason for Leaving			

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Address			
Phone			
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Special Skills and Qualifications _____

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.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes ____ No ____

Remarks: _____

_____ Interviewer _____ Date _____

Employed Yes ____ No ____ Date of Employ _____

Job Title _____ Pay Rate _____ Dept. _____

By _____ Date _____

NOTES:
