

ANNA MARIE'S ALLIANCE
Central Minnesota Task Force on Battered Women

Application for Employment

Qualified applicants are considered for employment without regard to race, color, creed, ancestry, sex, marital status, national origin, sexual orientation, age, physical or mental disability, religious affiliation, veteran status or status with regard to public assistance. Completion of the Affirmative Action Sheet is optional. Please let us know if you need assistance in completing this application.

Referral Source { } Advertisement { } Employee { } Relative { } Government Employment Agency
{ } Walk-in { } Private Employee Agency { } Other _____

General Information

Name _____ Date ____/____/____
Last First Middle

Address _____ Social Security # _____
Street City Zip Code

Telephone #(____) _____ Mobile/Beeper/Other Phone #_(____) _____ E-mail Address _____

If necessary, best time to call you at home is..... AM

May we contact you at work?{ } Yes { } No

If yes, work number and best time to call....._(____) _____ PM

Have you submitted an application here before?{ } Yes { } No

If yes, give date(s) and positions (s) _____

Have you ever been employed here before?{ } Yes { } No

If yes, give datesFrom ____/____/____ To ____/____/____

Work Desired

Position(s) applied for _____

Date available for work.....____/____/____ What is your desired salary?.....\$ _____

Type of employment desired { } Full-time { } Part-time { } Temporary { } Seasonal

Are you able to meet the attendance requirements of the position?{ } Yes { } No

Will you work overtime if required?.....{ } Yes { } No

If no, please explain _____

Have you ever pled "guilty" or "no contest" to, or been convicted of a misdemeanor or felony?.....{ } Yes { } No

If yes, please provide date(s) and details _____

Answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Are you legally eligible for employment in this country?.....{ } Yes { } No

Educational Background

A. List last three (3) schools attended, starting with most recent. **B.** List number of years completed. **C.** Indicate degree or diploma earned, if any. **D.** Major field of study. Minor field of study (if applicable).

A. School	B. # of years	C. Degree/ Diploma	D. Major Field of Study	Minor (if applicable)

Special Training

Special training, licenses and/or certificates: _____

Additional Information

List any additional information you would like us to consider. _____

Employment History

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

EMPLOYER	TELEPHONE #	<u>DATES EMPLOYED</u>
_____	() _____	From: _____ To: _____
ADDRESS		<u>HOURLY RATE/SALARY</u>
_____		\$ _____ Per _____
STARTING JOB TITLE/FINAL JOB TITLE		<u>BRIEF SUMMARY OF WORK PERFORMED</u>
_____		_____
IMMEDIATE SUPERVISOR AND TITLE		_____
_____		_____
REASON FOR LEAVING		_____
_____		_____
May we contact for reference? Yes ___ No ___ Later _____		

EMPLOYER	TELEPHONE #	<u>DATES EMPLOYED</u>
_____	() _____	From: _____ To: _____
ADDRESS		<u>HOURLY RATE/SALARY</u>
_____		\$ _____ Per _____
STARTING JOB TITLE/FINAL JOB TITLE		<u>BRIEF SUMMARY OF WORK PERFORMED</u>
_____		_____
IMMEDIATE SUPERVISOR AND TITLE		_____
_____		_____
REASON FOR LEAVING		_____
_____		_____
May we contact for reference? Yes ___ No ___ Later _____		

EMPLOYER	TELEPHONE #	<u>DATES EMPLOYED</u>
_____	() _____	From: _____ To: _____
ADDRESS		<u>HOURLY RATE/SALARY</u>
_____		\$ _____ Per _____
STARTING JOB TITLE/FINAL JOB TITLE		<u>BRIEF SUMMARY OF WORK PERFORMED</u>
_____		_____
IMMEDIATE SUPERVISOR AND TITLE		_____
_____		_____
REASON FOR LEAVING		_____
_____		_____
May we contact for reference? Yes ___ No ___ Later _____		

EMPLOYER	TELEPHONE #	<u>DATES EMPLOYED</u>
_____	() _____	From: _____ To: _____
ADDRESS		<u>HOURLY RATE/SALARY</u>
_____		\$ _____ Per _____
STARTING JOB TITLE/FINAL JOB TITLE		<u>BRIEF SUMMARY OF WORK PERFORMED</u>
_____		_____
IMMEDIATE SUPERVISOR AND TITLE		_____
_____		_____
REASON FOR LEAVING		_____
_____		_____
May we contact for reference? Yes ___ No ___ Later _____		

Comments (INCLUDING EXPLANATION OF ANY GAPS IN EMPLOYMENT) _____

REFERENCES

Provide three references. At least one must be a professional reference (other than friends or relatives) who is familiar with your work and educational qualifications.

APPLICANT STATEMENT

I certify that all information I have provided is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented, will be cause to (1) cancel further consideration of this application, or (2) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representative, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute contract for employment for any specified period or definite duration. I understand that no representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms as stated above.

Signature of Applicant _____ Date ____/____/____