

Responsibilities

Employment Application

Applicant Information								
Last Name	First			M.I		Date		
Street Address				Apartment/Unit #				
City	State			Zip				
Phone	E-mail							
Position Applied for	Date Available				Desired Salary			
Are you legally eligible to work in the U.S.? Yes No								
Have you ever worked for this a	No	If y	es, when?					
Have you ever volunteered for this agency? Yes No If yes, when?								
Have you completed the ICASA 40-Hour Sexual Assault Training? Yes No If yes, when?								
Education								
College	Address							
From To	Did you graduate?	res No)	Degree				
Other Address								
From To	Did you graduate?	es No)	Degree				
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Employment History or Attach Resume								
Company	Title				From:	То:		
Address	Phone #							
Responsibilities								
Company	Title			From:	То:			
Address	Phone #							
Responsibilities								
Company	Title					From:	To:	
Address	Phone #							



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Professional References						
Full Name	Relationship					
Company	Phone #					
Address						
Full Name	Relationship					
Company	Phone #					
Address						
Full Name	Relationship					
Company	Phone #					
Address						
Disclaimer and Signature						
I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.						
I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information.						
In consideration for my employment, I agree to abide by the rules and regulations of the agency, which rules may be changed, withdrawn, added or interpreted at any time, at the agency's sole option and without prior notice to me.						
I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the agency or myself.						
I understand that any employment is contingent on a satisfactory background check.						
Signature	Date					