



Application for Employment

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age or marital status, the presence of a non-job-related medical condition or disability or any other legally protected status.

(Please Print)

Date of Application _____

Position(s) Applied for _____

Email: _____

Referral Source:

Advertisement

Friend

Relative

Walk-in

Employment Agency

Other

Name _____

(Last)

(First)

(Middle)

Address _____

Telephone (_____) _____ Social Security Number _____

Valid Texas Driver's License number: _____

Do you have current motor vehicle liability insurance? Yes No

Under what names have you been previously employed? _____

If employed and you are under 18, can you furnish a work permit? Yes No

Have you filed an application here before? Yes No If yes, give date _____

Have you ever been employed here before? Yes No If yes, give date _____

Are you employed now? Yes No If yes, may we contact your present employer? 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 Shift Work Temporary

Are you on a lay-off and subject to recall? Yes No

Can you travel if a job requires it? yes No

Have you been convicted of, been given probation or deferred adjudication in lieu of sentencing or plead no contest for any offense other than a minor traffic violation? Yes No

If yes, please explain in detail _____

Are you charged with an unresolved criminal offense? Are you charged with a crime that has not yet resulted in a plea of guilty, acquittal, deferred adjudication, conviction, probation, or dismissal?

Yes No If yes, please explain in detail _____

*Note: A "yes" answer to these questions does not automatically disqualify you for employment. The nature and date of the crime/charge and type of job for which you are applying will be considered. Falsification of this application is grounds for an automatic termination.

An Equal Opportunity Employer M/F/V/H/

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex, age or national origin.

Employer	Telephone	Dates Employed	Summarize the nature of the work performed and job responsibilities
Address		From To	
Job Title			
Supervisor		Hourly Rate/Salary	
Reason for Leaving		Starting Final	

Employer	Telephone	Dates Employed	Summarize the nature of the work performed and job responsibilities
Address		From To	
Job Title			
Supervisor		Hourly Rate/Salary	
Reason for Leaving		Starting Final	

Employer	Telephone	Dates Employed	Summarize the nature of the work performed and job responsibilities
Address		From To	
Job Title			
Supervisor		Hourly Rate/Salary	
Reason for Leaving		Starting Final	

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications:

Summarize special skills, additional languages and qualifications acquired from employment or other experience.

Education

	Elementary	High School	College/ University	Graduate/Professional
School Name				
Year Completed:	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/ Degree				
Describe the Course of Study:				
Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities				
Honors Received:	<hr/> <hr/> <hr/>			
State any additional information you feel may be helpful to us in considering your application.				
<hr/> <hr/>				
Veteran of the U.S. Military Service? <input type="radio"/> Yes <input type="radio"/> No If yes, Which Branch? <hr/>				

References

1.	_____ (Name)	_____ (Phone#)
	_____ (Address)	
2.	_____ (Name)	_____ (Phone#)
	_____ (Address)	
3.	_____ (Name)	_____ (Phone#)
	_____ (Address)	

Applicant's Statement

I, _____ certify that all my statements and representation made in my Employment Application, resumes, and interviews are true and correct, and I have withheld no relevant information which would, if disclosed, adversely affected my application. I understand that the Center for Transforming Lives relies upon such statements/representations in making its employment decisions.

In addition, I authorize the Center for Transforming Lives to undertake, or cause to be undertaken, an investigation(s) prior to or during employment to cover, without limitation, one or more of the following items:

1. The obtaining of information concerning my educational background from any institution or other source:
2. The obtaining of information concerning my employment history (including United States military service, if applicable), from any prior employer or other source:
3. The obtaining of information concerning me, if any, which may be obtained from public records:
4. The obtaining of a consumer investigation report. In this regard, I acknowledge the following disclosure was made to me by the Center for Transforming Lives in accordance with the Fair Credit Reporting Act, Public Law 91-508:
5. The Center for Transforming Lives may request an investigation which would provide information concerning my character, general reputation, personal characteristics and mode of living, and that if one is made additional information as to the nature and scope of the report will be furnished to you upon your written request.

I authorize all persons, institutions, prior employers, organizations and companies to furnish any and all pertinent information known to them about me, and all such parties can rely on this document. I further authorize the Center for Transforming Lives to furnish information contained on my Employment Application to any third party to aid the Center for Transforming Lives in making its employment decision on me.

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 point 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 officer 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