



EMPLOYMENT APPLICATION

An Equal Opportunity Employer-All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law. The Adult Education Center will make reasonable workplace accommodation for any applicant or employee with a disability that does not constitute an undue hardship. Reasonable Accomodation requests must be referred to the Hiring Manager or Supervisor.

Incomplete information could disqualify you from further consideration. Please complete all fields.

APPLICANT INFORMATION						
Last Name		First		M.I.	Date	
Street Address				Apartment/ Unit #		
City		State		Zip		
Home Phone		Mobile Phone #				
E-mail Address						
Are you eligible to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you at least 18 years or older? (If no, you may be required to provide authorization to work.)		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever been terminated from employment or asked to resign by an employer?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, Please provide company names and details			
Can you work any shift?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Can you work overtime, including weekends?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>				
EMPLOYMENT DESIRED						
Date you can start			Hourly Rate/ Salary desired			
Position desired						
Are you currently employed?		If so, may we inquire of your present employer?				
REFERRAL SOURCE						
How did you hear about us?	Walk In <input type="checkbox"/>	Advertisement <input type="checkbox"/>	Referral <input type="checkbox"/>	Other <input type="checkbox"/>		
Have you ever worked for this company before?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please explain.			
Do you know anyone who works for our company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, who?			
EDUCATION						
High School			Address			
Number of years attended			Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Subjects Studied
College or University			Address			
Number of years attended			Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree Received and Major
Trade, Business or Correspondence School			Address			
Number of years attended			Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree Received and Major



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EMPLOYMENT HISTORY INCLUDE YOUR LAST SEVEN (7) YEARS OF EMPLOYMENT HISTORY, INCLUDING PERIODS OF UNEMPLOYMENT, STARTING WITH THE MOST RECENT AND WORKING BACKWARDS IN TIME.

Employer Name		Telephone	
Address		Supervisor/Title	
Job Title and Responsibilities			
From	To	Reason for Leaving	
Employer Name		Telephone	
Address		Supervisor/Title	
Job Title and Responsibilities			
From	To	Reason for Leaving	
Employer Name		Telephone	
Address		Supervisor/Title	
Job Title and Responsibilities			
From	To	Reason for Leaving	

REFERENCES
Give the names of three persons not related to you, whom you have known at least three (3) years

Full Name		Company	
Address, Phone, E-mail		Years Acquainted	
Full Name		Company	
Address, Phone, E-mail		Years Acquainted	
Full Name		Company	
Address, Phone, E-mail		Years Acquainted	

DISCLAIMER AND SIGNATURE

The Adult Education Center is an equal opportunity employer. The Adult Education Center does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, gender, sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service. I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for The Adult Education Center to hire me. If I am hired, I understand that either The Adult Education Center or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of The Adult Education Center has the authority to make any assurance to the contrary. I attest with my signature below that I have given to The Adult Education Center true and complete information on this application. No requested information has been concealed. I authorize The Adult Education Center to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information. I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature	Date
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THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE SIGNED/DATED ABOVE.