

# Discovery Zone

## Employment Application

PLEASE PRINT AND COMPLETE ALL SECTIONS

Today's Date: \_\_\_\_\_

### Name

Full Name: \_\_\_\_\_

*Last*

*First*

*M.I.*

Job Applying for: \_\_\_\_\_ Full time  Part time  Temporary

Salary Desired: \$ \_\_\_\_\_ Date Available: \_\_\_\_\_ Social Security Number \_\_\_\_\_

### Personal

Address: \_\_\_\_\_

*Street Address*

*Apartment/Unit #*

*City*

*State*

*ZIP Code*

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

If hired, can you furnish proof of eligibility? YES  NO  Are you 18 years or older? YES  NO

Can you perform the essential function of the position for which you are applying? YES  NO

Have you ever worked or attended school under another name? YES  NO

If yes, give details. \_\_\_\_\_

Have you ever worked for this organization? YES  NO  If yes, when? \_\_\_\_\_

Have you ever applied here before? YES  NO  If yes, when? \_\_\_\_\_

Are you presently employed? YES  NO

If yes, may we contact your current employer for a reference? YES  NO

Have you ever been fired or asked to resign from a job? YES  NO

Have you ever been convicted of a felony violation? YES  NO

If yes, give details. \_\_\_\_\_

If employed by us, do you expect to be employed elsewhere? YES  NO

If yes, give details. \_\_\_\_\_

### Education

High School or GED: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Vocational or Technical: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

College or University: \_\_\_\_\_ Address: \_\_\_\_\_

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From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Graduate School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Do you have other skills or training that would be helpful for the job? If yes, please explain.

## Employment History

Please list employers starting with the current or most recent. **A job offer may be contingent on acceptable references from employers,**

Name of Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ *City* *State* *ZIP Code*

Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Job Title: \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Name of Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ *City* *State* *ZIP Code*

Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Job Title: \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Name of Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

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Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_  
*City* *State* *ZIP Code*

Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Job Title: \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Name of Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_  
*City* *State* *ZIP Code*

Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Job Title: \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Gaps in Employment: \_\_\_\_\_

## Volunteer Activities and Professional Memberships

Organization Name: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_ Years Active: \_\_\_\_\_

## Certification

I hereby certify that all the information provided in this employment application is true and complete. I understand that false information or the omission of information may disqualify my candidacy and may be grounds for termination. I further understand that I am applying to a Drug Free Workplace and may be required to submit to testing for the presence of drugs as a condition for employment.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_