

# Employment Application

<b>Employment Application</b>					Last Name, First Initial:
<b>Personal Information</b>					
Name (Last, First, MI)					
Street address					
City, State, Zip					
Home phone number		Work phone number			
Social security number		Driver's license number/state/expiration			
<i>(if job involves any driving)</i>					
<b>Employment Desired</b>					
Position applied for					
How did you hear about this position?					
Date available for work		Desired hours (full time, part time, etc.)			
<b>Education</b>					
	Name and Address of School	Course of Study	Total Years of Study	Degree/Diploma	Today's Date:
High School					
College					
Other (Specify)					
List any seminars, classes or other education not listed above which may help qualify you for this position:					
.....					
.....					

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## Employment History

List below all present and past employers over the past five years, starting with your **most recent** employer. Account for all periods of unemployment. You must complete this section even if attaching a resume. May we contact your current employer?  YES  NO

1.	Employer (current <input type="checkbox"/> Yes <input type="checkbox"/> No)		Start Date	End Date	Essential job functions of final position
	Address				1.
	City, State, Zip		Starting Salary	Ending Salary	2.
	Phone number				3.
	Fax number	Supervisor(s)			4.
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				
	.....				
	.....				
2.	Employer		Start Date	End Date	Essential job functions of final position
	Address				1.
	City, State, Zip		Starting Salary	Ending Salary	2.
	Phone number				3.
	Fax number	Supervisor(s)			4.
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				
	.....				
	.....				

[PLEASE CONTINUE ON NEXT PAGE]

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## Employment History

3.	Employer	Start Date	End Date	Essential job functions of final position	
	Address			1.	
	City, State, Zip		Starting Salary	Ending Salary	2.
	Phone number				3.
	Fax number	Supervisor(s)		4.	
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				
	.....				
	.....				
4.	Employer	Start Date	End Date	Essential job functions of final position	
	Address			1.	
	City, State, Zip		Starting Salary	Ending Salary	2.
	Phone number				3.
	Fax number	Supervisor(s)		4.	
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				
	.....				
	.....				

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## Additional Information

Have you ever been employed with this company before?  Yes  No  
If Yes, when? .....

Do you have any friends or relatives employed by this company?  Yes  No  
If Yes, please provide their names and relationship to you: .....

Are you currently employed?  Yes  No  
May we contact your employer?  Yes  No  
Are you currently on "lay off" status and subject to recall?  Yes  No

If you are under 18 years of age, can you provide proof of your eligibility to work?  Yes  No

If hired, can you provide proof of U.S. citizenship or proof of your legal right to work in the U.S.?  Yes  No

Are you able to perform all of the essential functions of the job for which you are applying with or without reasonable accommodation?  Yes  No

If hired, are there any accommodations the company would need to provide so that you can perform all those essential functions and duties of the position being applied for?  Yes  No  
If Yes, please explain: .....

Have you ever been convicted of a felony or misdemeanor?  Yes  No  
If Yes, please explain: .....

If driving is a requirement of the position applied for, have you in the last 7 years been convicted of Driving Under the Influence "(DUI)"  Yes  No  N/A

If hired, do you have a reliable means of transportation to and from work?  Yes  No

If hired, would you be able to travel or work overtime as needed?  Yes  No



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*Please read each statement closely and initial each acknowledging your understanding*

## **Equal Employment Opportunity Statement**

\_\_\_\_\_ This company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. The Company desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

## **Discrimination and Sexual Harassment Policy Statement**

\_\_\_\_\_ This Company will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

## **Complete and Accurate Information**

\_\_\_\_\_ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

## **At-Will Employment**

\_\_\_\_\_ I understand and agree that if I am employed, my employment will be "at-will", which means that the Company may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the Company will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superceded and that no promise or representation contrary to the foregoing is binding on the Company unless made in writing and signed by the Company's president.

I HAVE READ AND UNDERSTAND THE ABOVE POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM IF EMPLOYED BY THE COMPANY.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please return a copy of this application and certificate pertaining to water safety, first aid or CPR that you may have, to the address below.

Laurel Oak Ranch Recreation Association  
6200 Old Plank Rd.  
High Point, NC 27265