

# Employment Application



Thank you for your interest in working at South County Community Services! We are an Equal Opportunity Employer, therefore this application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the organization.

APPLICANT INFORMATION			
Last Name:		First:	
		M.I.:	Date:
Street Address:			
City:		State:	Zip Code:
Home Phone:		Cell Phone:	
Email Address:			Date Available:
Position Applied For:			
Are you a citizen of the United States?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?
			YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?
			If yes, explain:
Have you ever been convicted of a crime?		YES <input type="checkbox"/> NO <input type="checkbox"/>	
EDUCATION			
High School:		Address:	
From:	To:	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>
College:		Address:	
From:	To:	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree and Major:
Other:		Address:	
From:	To:	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree and Major:
Please list your employment history for the past 10 years. Attach additional sheets if necessary.			
PREVIOUS EMPLOYER			
Company:		Phone: (    )	
Address:		Supervisor:	
Job Title:			
From:	To:	Reason for Leaving:	
Starting Salary:		Ending Salary:	
Responsibilities:			
May we contact your previous employer for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

PREVIOUS EMPLOYER	
Company:	Phone: (    )
Address:	Supervisor:
Job Title:	
From:	To: Reason for Leaving:
Starting Salary:	Ending Salary:
Responsibilities:	
May we contact your previous employer for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>	
PREVIOUS EMPLOYER	
Company:	Phone: (    )
Address:	Supervisor:
Job Title:	
From:	To: Reason for Leaving:
Starting Salary:	Ending Salary:
Responsibilities:	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>	
MILITARY SERVICE	
Branch:	From: To:
Rank at Discharge:	Training Received:
REFERENCES	
<b>Please list two professional references.</b>	
Full Name:	Relationship:
Company:	Phone: (    )
Address:	
Full Name:	Relationship:
Company:	Phone: (    )
Address:	
DISCLAIMER AND SIGNATURE	
I certify that the information on this application is true and complete to the best of my knowledge. If this application leads to employment, I understand that any false or misleading information in my application may result in my termination at any time.	
I authorize my current and former employers to release any information contained in my personnel file or otherwise known by them and hereby release them from any liability as a result of sharing this information.	
I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this company is of an "at will" nature, which means that I may resign at any time and the Employer may discharge me 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 the Executive Director.	
Signature:	Date: