



Application for Employment

Equal Opportunity Employer
(please print)

Date: ____/____/____

Date Available: ____/____/____

Personal Information

First Name: _____ Middle Initial: _____ Last Name: _____

Email address: _____ Are you 18 years old or older? _____

Address: _____

City: _____ State: _____ Zip Code: _____

Evening Phone: (____) _____ - _____ Day Phone: (____) _____ - _____

Work Information

What position are you applying for? _____

Are you applying for: Full-time Part-time Temporary Nights Summer

If part-time, specify days & hours available: _____

Which shift(s) are you willing to work? 6 a.m. - 2 p.m. 2 p.m. - 10 p.m.

Will you consider working weekends? Yes No

If yes, Saturday, Sunday or both? _____

Have you ever been employed at Crossroads? Yes No

If yes, please provide dates and position: _____

Reason for leaving? _____

Have you ever done volunteer work here before? Yes No If yes, when? ____/____/____

Military Service

Branch of Service: _____ Highest rank held: _____

Specialized duties / training: _____

Professional References:

(Do not include relatives. Failure to provide three professional references will result in disqualification.)

Name	City, State	Telephone	Occupation	Years Known

Education

Circle highest grade / year completed High School College Graduate School
 9 10 11 12 GED 1 2 3 4 5 1 2 3 4 5

	Name of School City & State	Grade Pt Average	College Major	Dates of Attendance		Graduated		Type of Degree Conferred
				From	To	Yes	No	
High School			NA					
Comm. College Tech School								
College or University								
College or University								
Grad. School								
Other								

List any computer knowledge / experience: _____

Please list any additional job related experiences, skills or training information you would like us to consider:

Please explain why you are interested in working at the Crossroads Center:

(You may continue your explanation on the back of this sheet, if needed.)

Employment Experience (list most recent first)

1	_____ Name of Employer	_____ City and State	() - Telephone
	_____ TO _____ Date(s) employed	_____ / _____ Starting salary Final Salary	_____ Position Held
	_____ Supervisor Outline duties of position:	_____ Reason for leaving	
2	_____ Name of Employer	_____ City and State	() - Telephone
	_____ TO _____ Date(s) employed	_____ / _____ Starting salary Final Salary	_____ Position Held
	_____ Supervisor Outline duties of position:	_____ Reason for leaving	
3	_____ Name of Employer	_____ City and State	() - Telephone
	_____ TO _____ Date(s) employed	_____ / _____ Starting salary Final Salary	_____ Position Held
	_____ Supervisor Outline duties of position:	_____ Reason for leaving	

May we contact the employers above? Yes No

If no, indicate which one(s) you do not wish us to contact. _____

Do you have any problems that would hinder you from performing your duties? _____

For purposes of reference checks, list any other names (such as a maiden name) that you have used.

Criminal History Disclosure:

Exclude minor traffic violations

(Each case will be reviewed separately. This may not disqualify you for employment)

Have you ever been convicted of a misdemeanor? _____ Yes _____ No

Have you ever been convicted of a felony? _____ Yes _____ No

Have you ever been convicted of a sex-related crime? _____ Yes _____ No

Have you ever been convicted of a child or elder abuse offense? _____ Yes _____ No

If yes, to either question, please list the offense and date(s): _____

If you have lived at your current address for less than five years, provide previous addresses:

NOTE TO APPLICANTS: Do not answer this next question until you have had the opportunity to be informed about the requirements of the occupation by reviewing a current job description.

Are you capable of performing the essential functions of the occupation for which you have applied?

_____ Yes _____ No If no, explain: _____

AUTHORIZATION STATEMENT:

Upon signing this application, I represent that all the information now or hereafter given by me in support of my application for employment is true and complete. I authorize you to verify any information concerning my employment, education, or background history with the appropriate individuals, companies, institutions or agencies and I authorize them to release such information as you require, including my prior disciplinary employment record, without any obligation to give me written notice of such disclosure. I also authorize you to release any information requested by any of my prospective or subsequent employers without any obligation to give me written notice of such disclosure. I hereby release you and them from any liability whatsoever as a result of any such inquiries and disclosures. I agree that any false information in support of my application may subject me to discharge at any time during the period of my employment. If hired, I agree I will serve at the will of the firm and I agree that I shall be bound by the rules, policies, regulations and terms and conditions of employment of the firm as they are from time to time changed with or without notice to me. I agree that either party may terminate the employment relationship with or without cause, at anytime for any reason.

Date: ____/____/____ Signature: _____