

APPLICATION FOR EMPLOYMENT

(Please print)

IVEDC is an Equal Opportunity Employer. IVEDC does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

Application Date: _____ Position/s Applied For: _____

What are your salary expectations for this position? _____

Referral Source:

Advertisement Employment Agency Friend Relative Other _____

Name: _____
Last First Middle

Address: _____
Number Street City State Zip Code

Home/Cell Phone: _____ Business Phone: _____

Email address: _____ Other contact: _____

If known by any other name, please indicate: _____

Have you ever filed an application or been employed here before? Yes No

Are you legally authorized to work in the United States? Yes No

Are you available to work: Full-Time Part-time Date Available to work _____

Do any of your friends or relatives work here: Yes No
If yes, list name(s): _____

Are you over the age of 21? Yes No

Is there any reason that you could not perform the essential functions of the position for which you are applying? Yes No _____

Are you on lay-off and subject to recall? Yes No

Do you have the ability to drive? Yes No

Do you have reliable transportation to perform the duties of the position? Yes No

Employment Experience

List each job held, starting with your present or last job.

1)		
Employer:	Dates Employed:	
Address:	From:	To:
Phone Number:		
Job Title:	Supervisor:	
Work Performed:		
Reason for Leaving:		
2)		
Employer:	Dates Employed:	
Address:	From:	To:
Phone Number:		
Job Title:	Supervisor:	
Work Performed:		
Reason for Leaving:		
3)		
Employer:	Dates Employed:	
Address:	From:	To:
Phone Number:		
Job Title:	Supervisor:	
Work Performed:		
Reason for Leaving:		
4)		
Employer:	Dates Employed:	
Address:	From:	To:
Phone Number:		
Job Title:	Supervisor:	
Work Performed:		
Reason for Leaving:		

Education

	High School				Vocational Training				College/ University				Graduate/ Professional			
School Name																
Years Completed/ Degree	9 <input type="checkbox"/>	10 <input type="checkbox"/>	11 <input type="checkbox"/>	12 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Diploma/Degree																
Describe Course of Study																
Describe any relevant training, skills, or certifications																

List trade or professional organizations of which you are a member: _____

Give name, address, and phone of three references not related to you whom you have known for at least three years:

1) Name: _____ Telephone: _____
Address: _____

2) Name: _____ Telephone: _____
Address: _____

3) Name: _____ Telephone: _____
Address: _____

Applicant Statement

I certify that answers given herein are true and compete to the best of my knowledge.

I authorize you to make such as may be necessary in arriving at an employment decision. I hereby release employers, school, or persons from all liability in responding to inquiries in connections with my application.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for IVEDC to hire me. If I am hired, I understand that IVEDC 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 IVEDC] has the authority to make any assurance to the contrary.

In the event of employment, I understand that any false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the organization.

Signature of Applicant: _____ Date: _____

This Section is for Agency Use Only

Arrange Interview: Yes No Date: _____ Interviewer: _____

Remarks:

Employed: Yes No Start Date: _____

Job Title: _____ Hourly Rate/Salary: _____