

APPLICATION FOR EMPLOYMENT Liberty Partnership Community Council

Application Must Be Completed in Full Submit Application to: jenn@lpknc.org

PERSONAL INFORMA	TION							
			Date of Applicat	ion				
Name		First			Middle			
E-mail Address				_ C	ell Phone			
Present Address				_ T	elephone (Da	y)		
City	State	Zip Co	de	_ T	elephone (Eve	ening)		
For which position are you	applying:			s	alary Require	ments	:	
Are you an AmeriCorps, P If yes, please indica	eace Corps, or other nate the service/s:							
If hired, check yes or no if	are you able to submit	verification o	of legal right to w	ork in	the United Sta	ates	^ Ye	s No
EDUCATION								
Name and Location of High School, Training Program, College and/or University			Major Field of Study		Degree (Type)		Did You Graduate?	
PROFESSIONAL REGI	STRATION, LICENS	SURE, ACC	REDITATION	AND/	OR CERTIF	ICAT	ION	•
	Туре		Registration N		Expiration D			State
PROFESSIONAL OR E	BUSINESS ORGANI	ZATION ME	EMBERSHIP/S	3	•			
What languages, other tha	n English, do you spea	ık fluently?		Read:		W	rite:	
= *	- '	•						

- Resume Is Not a Substitute for Completing the Following -

EMPLOYMENT EXPERIENCE - (Most recent employer first. Include a minimum of ten years if applicable. Use additional sheets if necessary)

1.				
Name of Company				
Street	City	State	Zip	Phone
Dates of Employment: From	To	Title of Position		
Present or last salary	Immediate Sup	ervisor		T'11
Brief Description of Duties & Respo				
blief Description of Duties & Nespo				
Reason for Leaving				
Treason for Leaving				
2.				
Name of Company				
Street	City	State	Zip	Phone
Dates of Employment: From	•			
Present or last salary				
		Name		Title
Brief Description of Duties & Response	nsibilities			
Reason for Leaving				
_				
3. Name of Company				
Street	City	State	Zip	Phone
Dates of Employment: From				
Present or last salary	Immediate Sup	ervisor Name		Title
Brief Description of Duties & Response	nsibilities			
Reason for Leaving				
4.				
Name of Company				
Street	City	State	Zip	Phone
Dates of Employment: From	To	Title of Position		
Present or last salary	Immediate Sup	ervisor Name		Title
Brief Description of Duties & Respo	insihilities			
Prior pescription of paties & Nespe				
Reason for Leaving				
Please explain any gaps in your emp	loyment history:			
. , , , , ,	· , ——			
Are you currently employed? Ye	s No Date ava	ailable to start	Rate of	Pay Expected

Name Telephone Street Address City State Z Name Telephone Street Address City State Z OLUNTEER EXPERIENCE: ARRATIVE: Please tell why you are interested in this position and any other information you know: (Optional)	AL REFERENCES:				
Street Address City State Z Name Telephone Street Address City State Z Name Telephone Street Address City State Z DLUNTEER EXPERIENCE: ARRATIVE: Please tell why you are interested in this position and any other information you know: (Optional)					
Name Telephone Street Address City State Z Name Telephone Street Address City State Z DLUNTEER EXPERIENCE: ARRATIVE: Please tell why you are interested in this position and any other information you know: (Optional)			Telephon	е	
Street Address City State Z Name Telephone Street Address City State Z OLUNTEER EXPERIENCE: ARRATIVE: Please tell why you are interested in this position and any other information you know: (Optional)	988	City	State	Zip	
Name Telephone Street Address City State Z OLUNTEER EXPERIENCE: ARRATIVE: Please tell why you are interested in this position and any other information you know: (Optional)			Telephon	е	
Street Address City State 2 OLUNTEER EXPERIENCE: ARRATIVE: Please tell why you are interested in this position and any other information you know: (Optional)	988	City	State	Zip	
OLUNTEER EXPERIENCE: ARRATIVE: Please tell why you are interested in this position and any other information you know: (Optional)		Telephone			
) \$\$	City	State	Zip	
know: (Optional)	EXPERIENCE:				
know: (Optional)					
know: (Optional)					
know: (Optional)					
know: (Optional)					
and the state of t					
lave you ever had a driver's license revoked or been convicted of any crime? Yes No This information will not be used to determine whether or not you are hired.)					
yes, describe in full				No	
lave you ever worked under any other name?If yes, what name?	n will not be used to determine whether	er or not you are hire	ed.)	No	
ist relatives working for us:	n will not be used to determine whethe	er or not you are hire	ed.)		
	n will not be used to determine whether n full	er or not you are hire	ed.)		
Name: Location: Location:	n will not be used to determine whether n full vorked under any other name? rking for us:	er or not you are hire	ne?		

APPLICANT AGREEMENT:

I certify that answers given are true and complete to the best of my knowledge. I authorize you to make any investigations and inquiries of my personal, employment, and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I will abide by all rules and regulations of Child & Family Resources, Inc.

I understand that any offer of employment is contingent upon drug test and fingerprint clearance. Employment is "at-will" and may be terminated by either employee or the employer at any time for any reason or no reason at all, with or without cause or notice. "At-Will" employment status may not be changed by any statement, verbal or written, by any official of Child & Family Resources, Inc.

Printed Name Signature of Applicant Date Signed

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non job-related medical condition or handicap.