North Lakeland Discovery Center

APPLICATION FOR EMPLOYMENT

(AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL

POSITION(S) APPLIED FOR _____ DATE OF APPLICATION _____

NAME _____
LAST FIRST MIDDLE

ADDRESS _____
STREET CITY STATE ZIP CODE

E-MAIL ADDRESS _____

PHONE #( )_____ ALTERNATE PHONE #( )_____

DATE AVAILABLE TO WORK _____/_____/_____

TYPE OF EMPLOYMENT DESIRED ☐ FULL TIME ☐ PART TIME ☐ TEMPORARY ☐ SEASONAL INTERNSHIP

HAVE YOU APPLIED/INTERVIEWED WITH DISCOVERY CENTER IN THE LAST 6 MONTHS? ☐ YES ☐ NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A ROUTINE TRAFFIC VIOLATION ? ☐ YES ☐ NO

IF YES, PLEASE EXPLAIN _____

CONVICTION WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT. EACH INSTANCE AND EXPLANATION WILL BE CONSIDERED IN RELATION TO THE POSITION FOR WHICH YOU ARE APPLYING.

EMPLOYMENT HISTORY

PROVIDE THE FOLLOWING INFORMATION FOR YOUR PAST 3 EMPLOYERS, ASSIGNMENTS, OR VOLUNTEER ACTIVITIES, STARTING WITH THE MOST RECENT:

_____ _____ _____ ( )_____
FROM TO EMPLOYER PHONE

_____ _____
JOB TITLE ADDRESS

IMMEDIATE SUPERVISOR AND TITLE

SUMMARIZE THE NATURE OF THE WORK AND RESPONSIBILITIES

_____ _____

_____ _____

REASON FOR LEAVING

SALARY

_____ START $_____PER_____ FINAL $_____PER_____

_____ _____ _____ ( )_____
FROM TO EMPLOYER PHONE

_____ _____
JOB TITLE ADDRESS

IMMEDIATE SUPERVISOR AND TITLE

SUMMARIZE THE NATURE OF THE WORK AND RESPONSIBILITIES

_____ _____

_____ _____

REASON FOR LEAVING

SALARY

_____ START $_____PER_____ FINAL $_____PER_____

EMPLOYMENT HISTORY CONTINUED

FROM	TO	EMPLOYER	( ) PHONE
JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		SUMMARIZE THE NATURE OF THE WORK AND RESPONSIBILITIES	
REASON FOR LEAVING		SALARY START $_____PER_____	FINAL $_____PER_____

EDUCATIONAL BACKGROUND

NAME AND LOCATION	YEARS COMPLETED	DID YOU GRADUATE?	COURSE OF STUDY
HIGH SCHOOL			
COLLEGE/UNIVERSITY			
OTHER			

SPECIAL SKILLS OR LICENSES HELD:

AVOCATIONAL INTERESTS OR HOBBIES:

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions, and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations, or organizations for furnishing such information.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I understand that I am not obligated to disclose sealed or expunged records of conviction or arrest.

SIGNATURE OF APPLICANT:_____ DATE:_____

REFERRAL SOURCE: HOW DID YOU HEAR ABOUT THIS POSITION? _____

REFERENCES INCLUDE AT LEAST ONE CURRENT OR PREVIOUS MANAGER/SUPERVISOR AND ONE CO-WORKER.

NAME _____

RELATIONSHIP _____

ADDRESS (STREET, CITY, SATE, ZIP) _____

TELEPHONE NUMBER _____

NAME _____

RELATIONSHIP _____

ADDRESS (STREET, CITY, SATE, ZIP) _____

TELEPHONE NUMBER _____

NAME _____

RELATIONSHIP _____

ADDRESS (STREET, CITY, SATE, ZIP) _____

TELEPHONE NUMBER _____

NAME _____

RELATIONSHIP _____

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