



Application for Employment

Email to: LCDC15@outlook.com

Full Name: _____ Date: _____

Present Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Position Applied For: _____ Salary Desired: _____

Days and Hours Available: _____

Date Available to Start: _____ Check: -Full Time -Part Time -Seasonal

Have you ever been employed with CCDC or LCDC? _____

If Yes, Position: _____

Apart from absence for religious observances and only if required for the job you are applying for:

Are you willing to work overtime? _____

Are you willing to work Saturdays? _____

Are you willing to attend night/weekend staff meetings? _____

Are you willing to provide necessary documentation to establish your identity and authorization to work in the United States under the Immigration Reform and Control act of 1986? _____

Birthdate: _____ Social Security Number: _____

Since reaching age 18, have you ever been convicted of any criminal offense other than minor traffic violations? _____ (Note: Convictions do not necessarily bar you from employment, but are reviewed as related to the relevancy of the position applied for.)

If Yes, when, where, and disposition of the case: _____

Do you have relatives employed by the center? _____

Name, Position, Relationship: _____

Are you able to perform all the essential functions of the job for which you are applying, with or without without reasonable accomodation? _____

Education:

Complete for the most recent level of education you have complete or are currently enrolled in.

School: _____ Address: _____

Last Grade level/ Year Completed: _____ Graduation: _____ Diploma/Degree: _____

Professional License/Certification: _____ State: _____

Expiration Date: _____ Registration No: _____

Work Experience:

Please list employment record over the last 10 years starting with your most recent employer.

Periods of unemployment should be listed in the Unemployment History Section.

1. Employer: _____ Supervisor: _____

Address: _____ Phone : _____

Job Title: _____ From: _____ To: _____

Starting Salary: _____ Final Salary: _____ Description of Duties: _____

Reason for Leaving: _____

2. Employer: _____ Supervisor: _____

Address: _____ Phone : _____

Job Title: _____ From: _____ To: _____

Starting Salary: _____ Final Salary: _____ Description of Duties: _____

Reason for Leaving: _____

3. Employer: _____ Supervisor: _____

Address: _____ Phone : _____

Job Title: _____ From: _____ To: _____

Starting Salary: _____ Final Salary: _____ Description of Duties: _____

Reason for Leaving: _____

May we Contact your most recent Employer: _____

Do you have a Valid Drivers License: _____ Number: _____ CDL? _____

Unemployment History

Please account for all periods of unemployment of one month duration or longer over the past 10 years. Include volunteer work, temporary employment, or special skills utilized during this time.

From: _____ To: _____ Reason: _____

From: _____ To: _____ Reason: _____

From: _____ To: _____ Reason: _____

From: _____ To: _____ Reason: _____

Special Skills

Please Indicate which office skills you maintain: MAC/PC: _____ Typing/WPM: _____

Please include any other information you think would be helpful to us in considering you for employment, such as: additional work experience, publications, activities, accomplishments, ect.

References

Please list personal references (not relatives/employers) who are acquainted with your work history and you have known at least one year:

Name	Occupation/Title	Phone	Years Known

For Reference purposes, Please List other names under which you worked or attended school:

I hereby affirm that the information provided by me on this form, whether in hard copy or electronic format, is true and correct to the best of my knowledge, and that I have not omitted any relevant information. I understand that any misrepresentation or omission may preclude an offer of employment or may result in the withdrawal of an offer of employment or, if my employment with LCDC has commenced, I may be subject to disciplinary action up to and including separation from employment as legally permissible. I also understand that my offer of employment and/or continued employment with LCDC is contingent upon successful completion of KBI background screen, which shall be exclusively related to the requirements for the position, which I am applying for and which includes a criminal background check. Accordingly, I understand that if I have begun work with LCDC, and I later fail to successfully complete the background screen, I may be separated from employment (as permitted by and in compliance with local law).

Applicant Signature: _____ Date: _____

For Center Use Only

Work References

Date	Employer	Phone	Person Contacted	Title
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Personal References

Date	Name	Phone	Occupation	Relationship
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Interview and Hire Information

Date of Interview	Interviewers Signature	Interviewer Title
_____	_____	_____
_____	_____	_____

Employed? _____ Start Date: _____

Job Title: _____ Hourly Rate/Salary: _____

Marital Status: _____ Gender: _____ Date of Birth: _____

Emergency Contact Information

Name: _____ Relationship: _____ Work Phone: _____

Address: _____ Cell Phone: _____

_____ Home Phone: _____

Name: _____ Relationship: _____ Work Phone: _____

Address: _____ Cell Phone: _____

_____ Home Phone: _____