



Employment Application – PLEASE PRINT and INCLUDE A COPY OF YOUR RESUME

Having both on file are required by funders.

Applicant Information

Full Name: _____ Date: _____
First M.I. Last

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____

Technical/Computer Skills: please list abilities _____

References

Please list **three** professional references.

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

**ALL Previous Employment –
Begin with most current employer**

Employer-1: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO
May we contact your previous supervisor for a reference?

Employer-2: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO
May we contact your previous supervisor for a reference?

Employer-3: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO
May we contact your previous supervisor for a reference?

Employer-4: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO
May we contact your previous supervisor for a reference?

Employer-5: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 YES NO
 May we contact your previous supervisor for a reference?

Employer-6: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 YES NO
 May we contact your previous supervisor for a reference?

USE BACK OF FORM FOR ADDITIONAL EMPLOYMENT

Military Service

Branch: _____ From: _____ To: _____
 Rank at Discharge: _____ Type of Discharge: _____
 If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

APPLICATION MUST BE COMPLETE. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

PLEASE READ CAREFULLY

**JOB APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION TO
 RELEASE EMPLOYMENT REFERENCE INFORMATION.**

I UNDERSTAND THAT Communities In Schools of Palm Beach County, Inc (CIS) will attempt to verify statements made on my application and made during my job interview. When contacted by Communities In Schools I give permission for my former employers to answer any and all questions based upon information available to them in my prior employment records. I understand that it is possible that my prior employment records may not be accurate. Nonetheless, in consideration of CISPBC's review of this application, I release CISPBC and all former employers from any liability as a result of the furnishing and receiving of this reference information. I understand that my failure to sign this reference release so that CISPBC can contact references and make a full background check of my previous work history will be deemed interference with and a withdrawal of my application for employment.

I understand that CISPBC requires certain information about me to evaluate my qualifications for employment and to conduct its business if I became an employee. I understand that false, incomplete or misleading statements or omissions on this application or any other pre or postemployment form may be considered sufficient cause for dismissal, if and when discovered. The use of this application does not indicate there are positions open and does not in any way obligate CIS.

I authorize references as well as developed references, other persons, companies, corporations, schools and law enforcement agencies to furnish to CISPBC and/or its agents or representatives any information they have concerning me. I understand that I have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of this investigation. I understand that prior to obtaining any information from a credit reporting service; CIS must first obtain my written consent in a disclosure separate from this application. I understand that CIS shall treat all this information in a confidential manner.

I understand that if I am employed by CISPBC, I must conform to the rules and policies of CISPBC. I understand that I have the right to terminate my employment at any time with or without notice, with or without cause and that CISPBC has a similar right. I understand that my employment by CISPBC does not constitute a guarantee that any position be continued for any length of time or that any job assignment or shift is permanent. I understand that I may be required to work scheduled and unscheduled overtime and scheduled weekend and holiday work when required by CISPBC. I understand that no one other than the President/CEO of CISPBC has authority to make any other agreement.

I understand that employment with CISPBC is contingent upon passing a background check. Background checks are provided through the School District of Palm Beach County.

I understand that I may be required to submit to drug testing now or at any time in the future and I agree to such testing. I also understand that I may be required to submit to a medical evaluation. Moreover, I understand that my failure or refusal to undergo such testing will result in the withdrawal of my employment application.

The Immigration Reform and Control Act of 1986 require that, after employment, employers verify the legal work authorization and identity of all new employees. An offer of employment will depend upon CISPBC's ability to verify this necessary information.

I understand that if I am hired, confidential information regarding CISPBC, and/or its clients and employees may be available to me and that this information must not be disseminated or used except for CISPBC's benefit.

If employed, I agree to keep all information about CISPBC, including such information regarding its business methods, protocols, clients and employees confidential and shall not disclose this information to any unauthorized personnel at any time, whether within or without CIS.

Complete Signature of Applicant

Date

Thank you for completing this application form and for your interest in employment with us. Due to the volume of applications received, we may not interview every applicant. In the event you are selected for interview, we will contact you.

Applications will not be considered active after 90 days from date of application unless renewed, in writing, by the applicant and mailed to Communities In Schools of Palm Beach County, Inc., 1660 Southern Blvd, Ste A, West Palm Beach, FL 33406

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