



Application for Employment

Begin here. Where questions do not apply, write N/A. **PLEASE PRINT.**

Qualified applicants are considered for applicable positions without regard to race, color, religion, sex, national origin, or other categories protected by applicable local, state, or federal employment laws. If you believe your equal employment rights have been violated, you may contact our Personnel Committee or the appropriate state or federal EEO agency. Applications are kept active for a period of three months.

Creekside Place has a smoke-free work environment.



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

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: () _____ E-mail Address: _____

Date Available: _____ Desired Salary: \$ _____

Position Applied for: _____

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 employed by Creekside? YES NO If yes, when? Under what name? _____

NOTE: Please fill out all requested information. Do not substitute a resume for work experience or education information.



TYPE OF SCHOOL	NAME AND ADDRESS OF SCHOOL	MAJOR (MJR) MINOR (MNR)	CIRCLE LAST YEAR ATTENDED	GRADUATED		DEGREE
				YES	NO	
High School or GED			9 10 11 12	<input type="checkbox"/>	<input type="checkbox"/>	
College			1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	
College			1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	
Graduate School			1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	
Business Trade Other			1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	



List any other experience, skills or other qualifications including hobbies, which you believe should be considered in evaluating your qualifications for employment.

List previous work experience beginning with current or most recent experience. Please include related jobs, promotions, internships, part-time, summer, and temporary employment or limited term employment (LTE) positions.

Company: _____ Phone: (____) _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Specific duties: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO Full-time Part-time
 Intern or LTE Summer Job

Company: _____ Phone: (____) _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Specific duties: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO Full-time Part-time
 Intern or LTE Summer Job

Company: _____ Phone: (____) _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Specific duties: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO Full-time Part-time
 Intern or LTE Summer Job

Company: _____ Phone: (____) _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Specific duties: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO Full-time Part-time
 Intern or LTE Summer Job

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

Please list three professional references.

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

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

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

Please be sure to fill out and sign the accompanying Authorization to Obtain a Consumer Credit Report and Release of Information for Employment Purposes.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application or material omissions shall be grounds for dismissal. I authorize investigation of all statements contained herein and further authorize the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company and any person or company providing information from any and all claims, causes of action or charges of any sort that may result from provision, receipt or utilization of such information. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other similar federal and state laws.

It is the policy of Creekside Place to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, national origin, marital status, or pregnancy, and to afford equal opportunities to individuals with a disability and any other characteristic protected by federal, state or local law. If hired, I agree to abide by all of the company's rules and regulations, and understand that, if employed, my employment may be terminated with or without cause, and with or without notice, at any time, at the option of either the company or me, I further understand that no representation, whether oral or written by any representative or agent of the company, at any time, can constitute a contract of employment. I understand that Creekside Place and all Plan Administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms or conditions of employment. No representative or agent of the company has the authority to enter into any agreement for employment for any specified period of time other than in a document signed by the President.

I understand that Creekside Place is under no obligation to consider or reconsider this application at any time, and that acceptance of this application does not constitute an offer of employment. Prior to or after the commencement of my employment, Creekside Place reserves the right to require lawful medical, drug, alcohol, aptitude, skill or other tests or examinations.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me.

Applicant Signature: _____ **Date:** _____

Date to begin work:		1 st Interviewer & Date:	
Job Title:		2 nd Interviewer & Date:	
Classification:		Starting Salary:	
Department/Division:		Final Approval:	