



Carroll County Community Center

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE _____

NAME _____ SOCIAL SECURITY NUMBER _____
LAST FIRST MIDDLEADDRESS _____
STREET CITY STATE ZIP

PHONE # _____ E-mail(optional) _____

ARE YOU 18 YEARS OR OLDER? YES ___ NO ___

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED
IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS YES ___ NO ___

EMPLOYMENT DESIRED

POSITION _____ DATE YOU CAN START _____ SALARY DESIRED _____

ARE YOU EMPLOYED NOW? _____ IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? _____

HAVE YOU APPLIED TO THE CCCC BEFORE? _____ WHERE? _____ WHEN? _____

REFERRED BY: _____

EDUCATION	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE OR BUSINESS SCHOOL				
GRADUATE SCHOOL				

US MILITARY OR NAVAL SERVICE _____ RANK _____ PRESENT MEMBERSHIP IN NATIONAL
GUARD OR RESERVES _____

SPECIAL SKILLS:

COMMUNITY ACTIVITIES:

FORMER EMPLOYERS (Please list the last three employers.)

DATE	TO/FROM	NAME AND PHONE NUMBER	SALARY	POSITION	REASON FOR LEAVING
1.					
2.					
3.					

REFERENCES: (Give the name of three people not related to you.)

	NAME	BUSINESS	PHONE NUMBER	YEARS AQUAINTED
1.				
2.				
3.				

In Case of An Emergency Notify _____
 NAME ADDRESS PHONE NUMBER

Required Information

Have you ever been convicted of a crime? (Exclude any marijuana offenses that are over two years old and minor traffic violations for which the fine was \$100.00 or less). YES NO

If yes, please state the date, location, and circumstances. _____

Are you a registered sex offender? YES NO

NOTE: The existence of a criminal record will not constitute an automatic bar to volunteering.

This form has been designed to comply with State and Federal fair employment practice laws prohibiting employment discrimination. The Carroll County Community Center does not discriminate on the basis of race, gender or creed.

I certify that all the information submitted by me on this application is true and complete and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at anytime. In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at anytime, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than the director has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

APPLICANT'S SIGNATURE

DATE