Application for Employment

HRC 20

The Human Resources Center is a tobacco free facility An Equal Opportunity Employer Human Resources Center, Inc. 294 Bethel School Road Honesdale, PA 18431 (570) 253-3782

Human Resources Center, Inc. is an Equal Opportunity employer and complies with all applicable Federal, State and local laws concerning discrimination in employment. No question in this Application is intended to elicit information in violation of any such law, nor will any information obtained in response to any question be used in violation of any such law.

HRCI complies with the law regarding reasonable accommodations for disabled applicants. Applicants who require reasonable accommodations to participate in the interview process should contact the Human Resources Director to arrange for such accommodations. Please read this Application carefully and print your responses in ink. You may submit a personal resume to accompany this Application; however, it is important for you to answer all questions and complete all sections of this Application.

| Position (s) applied for | | | | | _ Date of application/// | _ |
|---------------------------|-------------|-------------------------|-----------------------|----------------------|--|---|
| Referral Source Agency | | Advertisement | Employee | Relative | Government Employment | |
| rigency | | Walk-In | Private Emplo | yment Agency | Other | |
| | | Referral (Name of | source if applicable) | | | |
| Name | | | | | | _ |
| Address | Last | Fir | st | Middle | | |
| | Street | | State | Zij | o Code | _ |
| Telephone # (| _) | Mobi | le / Other Phone # (| _) | Social Security # | |
| Do you have a va | alid Driv | er's License | | | Yes 🗌 No | , |
| If yes, Driver's li | icense nu | umber | | State | | |
| | | | | | | |
| If yes, give date | ••••• | | | | | |
| Have you ever be | een empl | loyed here before | | | 🗌 Yes 🔲 No | |
| If yes, give dates | | | | Fro | m/To/ | |
| Are you legally e | eligible f | or employment in this | country? | | Yes 🗌 N | 0 |
| Date available fo | r work . | | | | | |
| Type of employn | nent desi | ired 🗌 Full-Time | Part-Time Ter | nporary 🗌 Season | nal 🗌 Educational Co-Op | |
| Will you relocate | e if job re | equires it? | 🗌 Yes 🗌 No 🛛 Wi | ll you travel if job | requires it? Yes No | С |
| Will you work ov | vertime i | f required? | | | Yes 🗌 N | 0 |
| If no, please expl | lain | | | | | |
| offenses such as | speeding | g tickets, which have n | | nged or sealed by a | es and misdemeanors, but excluding summ a court? Yes Yes I nse(s)* | • |

A conviction record will not automatically result in your disqualification from employment; felony and misdemeanor convictions will be considered only to the extent they relate to the job for which you have applied. However, failure to disclose a conviction and/or mischaracterization of a conviction automatically will result in your ineligibility for employment and/or termination of employment (even if the conviction would not have barred your employment had it been properly disclosed).

EMPLOYMENT HISTORY

Starting with current or most recent employment, list your work experience. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but you must complete this section of this Application as well. HRCI may verify all information disclosed in this Section.

| Employer | Telephone | Dates Employed From To | Summarize the type of work Performed and Job Responsibilities |
|--------------------------------|-----------------|----------------------------------|--|
| Address | | | _ |
| Job Title | | Hourly Rate/Salary Starting | |
| Immediate Supervisor and Title | | \$ Per | |
| Reason For Leaving | | Hourly Rate/Salary Final | |
| May we Contact For Reference? | □Yes □No □Later | \$ Per | |
| Employer | Telephone | <u>Dates Employed</u> From To | Summarize the type of work Performed and Job Responsibilities |
| Address | | | |
| Job Title | | Hourly Rate/Salary | |
| | | <u>Starting</u> | |
| Immediate Supervisor and Title | | \$ Per | |
| Reason For Leaving | | Hourly Rate/Salary Final | |
| May we Contact For Reference? | Yes No L | ater \$ Per | |
| Employer | Telephone | Dates Employed From To | Summarize the type of work Performed and Job Responsibilities |
| Address | , | | <u> </u> |
| Job Title | | Hourly Rate/Salary Starting | |
| Immediate Supervisor and Title | | \$ Per | |
| Reason For Leaving | | Hourly Rate/Salary Final | |
| May we Contact For Reference? | Yes No Lat | | |
| Employer | Telephone | Dates Employed From To | Summarize the type of work Performed and Job Responsibilities |
| Address | / | 110111 10 | <u> </u> |
| Job Title | | Hourly Rate/Salary Starting | |
| Immediate Supervisor and Title | | \$ Per | |
| Reason For Leaving | | Hourly Rate/Salary Final | |
| May we Contact For Reference? | Yes No La | ater \$ Per | |
| Comments: | | | |

Skills and Qualifications – Please list special training skills, licenses and/or certificates that may qualify you in the position for which you are applying.

EDUCATION

HRCI may verify with the sponsoring educational/training facility and/or professional organization/agency all information disclosed in this Section.

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned if any. D. Grade Point Average or Class Rank. E. Major field of study. F. Minor field of study (if applicable).

| A. SCHOOL | B. NUMBER OF YEARS COMPLETED | C. DEGREE DIPLOMA | D. GPA CLASS RANK | E. MAJOR | F. MINOR |
|-----------|---------------------------------|----------------------|----------------------|----------|----------|
| | | | | | |
| | | | | | |
| | | | | | |

References

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are not related to you.

| NAME | TELEPHONE | YEARS KNOWN |
|------|-----------|-------------|
| | () | |
| | () | |
| | () | |

ADDITIONAL INFORMATION

List professional, trade, business, or civic associations and any offices held. EXCLUDE INFORMATION WHICH WOULD REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, COLOR, DISABILITY OR ANY OTHER SIMILARLY PROTECTED STATUS.

| ORGANIZATON | OFFICES HELD |
|-------------|--------------|
| | |
| | |
| | |
| | |

List special accomplishments, publications, awards, etc.

EXCLUDE INFORMATION WHICH WOULD REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, COLOR, DISABILITY OR OTHER PROTECTED STATUS.

| Do you hold licensure? 🗌 Yes 🗌 No | If "Yes," please list below all states/jurisdictions in which you now hold or |
|--|---|
| have held licensure as a professional license: | |

| If you have a professional license, has your professional license ever been voluntarily withdrawn or have you ever been |
|--|
| disciplined by subject to reprimand by a professional board or other regulatory agency or has your professional license ever |
| been revoked, suspended, reduced, limited, placed on probation, not renewed Yes 🗌 No |
| If "Yes," please describe in full detail the circumstances and outcome |

I certify that the answers given by me to the foregoing questions and the statements made by me in this Application for Employment are correct and complete. I understand that, if I become employed, any material misrepresentation or omission of fact in this Application or in any resume or other materials submitted in connection with this Application for Employment shall be grounds for my discharge from employment.

I authorize HRCI, as part of its evaluation of my suitability for employment, to verify all education, training and professional licensure/certification/registry claimed by me and to secure from my previous employers and references information concerning my professional accomplishments, skills, work characteristics and ability. For these purposes, a photocopy of my signature which appears below shall serve in the same capacity as an original.

In compliance with the federal Immigration Reform and Control Act, I certify that, if hired, I will provide, within three (3) business days from the date my employment begins, proof of my identity and eligibility for employment in the United States.

I understand that this Application for Employment is not a contract for employment and that, if I am employed, employment with HRCI is "at will." This means that both HRCI and I each retain the right to terminate my employment for any or no reason with or without cause or notice at any time.

I further acknowledge and agree that no manager or representative of HRCI, other than an Officer/Principal in writing, has the authority to enter into an agreement for employment for any specified period of time, to guarantee any particular position for a specified period of time or to make any binding promises with respect to compensation, promotional opportunities or any other terms or conditions of employment.

I further acknowledge and agree that, if an offer of employment is extended to me, I will not rely on any oral statements made by any manager or other representative of HRCI with respect to any term or condition of employment in deciding whether to accept an offer of employment,

I also understand that, upon the commencement of my employment or during the period of my employment, I may be required to sign as a condition of my employment certain standard agreements protecting HRCI's confidential/proprietary information, trade secrets and customer/client relationships.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant ______Date ___/____

Affirmative Action Voluntary Information

We consider all applicants for positions without regard to race, color, religion, sex national origin, citizenship, age, mental or physical disabilities, veterans/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

COMPLETION OF INFORMATION BELOW IS VOLUNTARY

To be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated

Please be advised that this survey is <u>not</u> a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

Please Print

| Position(s) applied for | Date// | | | | | | |
|---|--------------------|---|---|--------------|---------|------------|--|
| Referral Source Walk-In Government Employment Agency Employee Relative Advertisement - Source | | | Private Employment Agency School Other | | | | |
| Name of person who referred yo | ou IF APPLIC | CABLE | | | | | |
| Applicant Informatio | n | | | | | | |
| NameLast | First | Middle | Telephone (_ |) | | | |
| Address | | | | | | | |
| Street Street Male Female | | City | State | Zip | | | |
| Please check one of th | | wing Equal Employment | Opportunity | | ation G | roups: | |
| American Indian/Alaskan Native Asian/Pacific Islander | | Asian/Pacific Islander | Multiracial (having parents of differer THIS IDENTIFCATION GROUP IS RECOGN ONLY IN THE STATE OF MICHIGAN. | | | RECOGNIZED | |
| For Administrative Use Position(s) applied for Av | e Only_ ailable | Not Available | | | | | |
| Other positions considered for _ | | | | | | | |
| Hired Yes No | | | | | | | |
| Position Hired For | | | Date of | hire | | | |
| From the EEO job classification Officials and Managers Professionals Technicians Notes | 🗌 Of | ow, which one best describes the pos Sales Workers fice and Clerical Workers Lab fft Workers (skilled) | | emi-skilled) | | | |