



# Carroll County Community Center

## APPLICATION FOR EMPLOYMENT

### PERSONAL INFORMATION

DATE \_\_\_\_\_

NAME \_\_\_\_\_  
LAST FIRST MIDDLE Int.

ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP

PHONE # \_\_\_\_\_ Email \_\_\_\_\_

ARE YOU 18 YEARS OR OLDER? YES \_\_\_ NO \_\_\_ D.O.B. \_\_\_\_\_

SOCIAL SECURITY NUMBER    -   -

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED  
IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATIONSTATUS YES \_\_\_ NO \_\_\_

### EMPLOYMENT DESIRED

POSITION \_\_\_\_\_ DATE YOU CAN START \_\_\_\_\_

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

HAVE YOU APPLIED TO THE CCCC BEFORE? \_\_\_\_\_ WHEN? \_\_\_\_\_

REFERRED BY: \_\_\_\_\_ Availability \_\_\_\_\_

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 \_\_\_\_\_

SPECIALSKILLS: \_\_\_\_\_

COMMUNITY ACTIVITIES \_\_\_\_\_

**FORMER EMPLOYERS (Please list the last three employers.)**

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

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

	<b>NAME</b>	<b>PHONE NUMBER</b>	<b>YEARS AQUAINTED</b>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

In Case of An Emergency Notify \_\_\_\_\_  

<b>NAME</b>	<b>ADDRESS</b>	<b>PHONE NUMBER</b>
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***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 employment.

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.

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**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.**

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**APPLICANT’S SIGNATURE** **DATE**