



Application for Employment

We consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected status.

Positions Applied For

Date of Application

How did you learn
learn about us?

Referred by
please list name

Advertisement
please list

Class Presentation

Job Center of Wisconsin

Job Fair

Other
please list

Last Name

First Name

Middle Name

Address

City

State

Zip Code

Telephone Number(s)

Email

Best time to contact you at home is.....

AM
PM

Are you over 18 years of age?

Yes

No

Have you ever filed an application with us before?

Yes

No

If yes, give date

Have you ever been employed with us before?

Yes

No

If yes, give date

Do any of your friends or relatives, other than spouse, work here?

Yes

No

Are you currently employed?

Yes

No

May we contact your present employer?

Yes

No

Are you prevented from lawfully becoming employed in this country
because of Visa or Immigration status?

Yes

No

Proof of citizenship or immigration status will be required upon employment

Date available to work

What is your desired salary range?

Are you available to work:

Full-Time

Part-Time

Shift 1st 2nd 3rd

Are you currently on "lay-off" status and subject to recall?

Yes

No

Can you travel if the job requires it?.....

Yes

No

Have you ever been convicted of a felony?.....

Yes

No

A criminal record does not constitute an automatic bar to employment, but will be considered if only it applies to the job in question.

Education

	Name and Address of School	Course of Study	Number of Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (specify)				

Describe any specialized training, apprenticeship, skills, and extra-curricular activities including any professional, trade, business or civic activities and offices held.

Employment Experience Please continue on a separate sheet of paper if you need additional space.

Start with your present or last job. Include any job-related military service assignments and volunteer activities for the last 5 years. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status. If applicable at the end indicate reason for absence of employment.

Employer	Dates Employed	From	To
Supervisor Name	Email	Phone Number	
City	State		
Job Title			
Reason for Leaving	Work Performed		

Employer
Supervisor Name
City
Job Title
Reason for Leaving

Dates Employed From To
Email
State
Work Performed
Phone Number

Employer
Supervisor Name
City
Job Title
Reason for Leaving

Dates Employed From To
Email
State
Work Performed
Phone Number

Employer
Supervisor Name
City
Job Title
Reason for Leaving

Dates Employed From To
Email
State
Work Performed
Phone Number

Personal References

Please list at least three references. References should be current or previous supervisors, co-workers, teachers or anyone you have worked or volunteered with. Family members and friends are not acceptable.

Name How Known

Phone Number Email

Name How Known

Phone Number Email

Name How Known

Phone Number Email

Chileda is an equal opportunity employer. This information is VOLUNTARY and will be used to assist us in our civil rights compliance.

Race: Asian Native American Pacific Islander White
African American Hispanic/Latino Other

Veteran: Yes No

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation?

Yes No

Applicant's Statement

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. The undersigned, an applicant for employment with Chileda, hereby authorizes the disclosure of any personal, educational, or employment information for use in determining suitability for employment. I release any and all parties from any claim for damages as a result of any disclosure of any information to Chileda. A copy of this authorization is deemed as valid as the original bearing my signature.

This application for employment shall be considered active for a period of time not to exceed three months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) or hiring paperwork including Background Information Disclosure forms may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature

Date

Print Name