

THE CARVER FOUNDATION OF NORWALK, INC.
APPLICATION FOR SUMMER CAMP EMPLOYMENT 2017
 PRE-EMPLOYMENT QUESTIONNAIRE EQUAL OPPORTUNITY EMPLOYER

DATE _____

PERSONAL INFORMATION:

NAME (LAST NAME FIRST) _____ SOCIAL SECURITY NO. _____

PRESENT ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

PHONE NO. _____ REFERRED BY _____

(_____) _____
 POSITION APPLYING FOR _____ DATE YOU CAN START _____ SALARY DESIRED _____

ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES YES NO

ARE YOU EIGHTEEN YEARS OF AGE OR OLDER. YES NO
 (IF HIRED, YOU ARE REQUIRED TO PROVIDE PROOF OF AGE AND ELIGIBILITY FOR EMPLOYMENT IN THE UNITED STATES)

ARE YOU CURRENTLY EMPLOYED? YES NO IF YES, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER YES NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO IF YES, PLEASE EXPLAIN
 (PRIOR CONVICTIONS WILL NOT NECESSARILY DISQUALIFY AN APPLICANT FROM EMPLOYMENT. APPLICANT NOT REQUIRED TO DISCLOSE EXPUNGED CHARGES)

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? YES NO IF YES, PLEASE SPECIFY WHEN AND WHAT POSITION

ARE YOU RELATED TO ANYONE CURRENTLY EMPLOYED BY THIS ORGANIZATION OR ANYONE CURRENTLY HOLDING A POSITION ON ITS' BOARD OF DIRECTORS? YES NO IF YES, WHOM? _____

EDUCATION:

NAME AND LOCATION OF SCHOOL	# YEARS COMPLETED	DID YOU GRADUATE	SUBJECTS STUDIED
HIGH SCHOOL			
COLLEGE			
TRADE, BUSINESS OR CORRESPONDENCE OR OTHER SCHOOL			
GRADUATE SCHOOL			

REFERENCES:

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GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME & OCCUPATION	ADDRESS	PHONE NUMBER	YEARS KNOWN
1			
2			
3			

AUTHORIZATION:

"I CERTIFY 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 SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION. I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS AT-WILL AND CAN BE TERMINATED BY EITHER PARTY WITH OR WITHOUT NOTICE, AT ANY TIME, FOR ANY REASON OR NO REASON. I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE."

DATE _____ SIGNATURE _____

***** DO NOT WRITE BELOW THIS LINE *****

INTEVIEWED BY _____ DATE _____

REMARKS FOR INTERVIEWERS USE

HIRED	YES	NO				SALARY WAGES

APPROVED: 1. _____ 2. _____ 3. _____
 HIRING MANAGER EXECUTIVE DIRECTOR PERSONNEL COMMITTEE