APPLICATION FOR EMPLOYMENT

Knox County Career Center 306 Martinsburg Road Mount Vernon, OH 43050 (740)397-5820 www.knoxcc.org

Any applicant considered for employment by the Knox County Career Center must pass a drug test at Mid-Ohio Corporate Care and complete BCI and FBI fingerprinting.

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, ancestry, genetic information, or any other legally protected status.

(Please Print) Position(s) Applied For **Date of Application** Last Name First Name Middle Name **Address** City Zip **Telephone Number(s)** e-mail address **Social Security Number** Have you ever been employed with us before ____ yes ____ no If yes, give date: Do any friends or relatives, other than a spouse work here? ____ yes ____ no If yes, state name and relationship Are you currently employed? ____ yes ____ no May we contact employers listed? ____ yes ____ no Are you legally authorized to work in the U.S.? (Proof of citizenship or ____ yes ____ no immigration status will be required upon employment) Can you perform the essential functions of this position with or without reasonable accommodations? ____ yes ____ no WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

School	Name & Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

WORK EXPERIENCE

Start with your present or last job. Include any job-related military service, assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed	Work Performed
Address	From	
Telephone Number	То	
Job Title Held	10	
Supervisor		
Reason for Leaving		

Employer	Dates Employed	Work Performed
Address	From	
Telephone Number	To	
Job Title Held	То	
Supervisor		
Reason for Leaving		

Employer	Dates Employed	Work Performed
Address	From	
Telephone Number		
Job Title Held	То	
Supervisor		
Reason for Leaving		

Explanation of gaps in employmen	

Describe any specialized training, apprenticeship, skills, and extra-curricular activities.			
	, trade, business, or civic activi gion, national origin, age, ance		
1			
TECHNOLOGY	•		
	owledge and experience		
PERSONAL/PRO	OFESSIONAL REFERENCE	S Do not include family memb	pers.
Name	Phone Number	Best Time to Call	Occupation
1.			
1.			
2.			
3.			
		l	
APPLICANT'S S	STATEMENT		
I certify that answ	wers given herein are true and	complete. I authorize inves	tigation of all statements
contained in this	application. I understand that	false or misleading informa	ation given in my application
or interview(s) will result in termination. I also understand that I am required to abide by all rules and regulations of the employer.			
1 cguiutions of the	. cinproyer.		
Signature of App	 blicant	Date	<u> </u>