

Employment Application

Rev. 08/2019

|  |
| --- |
| **Follow instructions carefully. Print or type. Provide detail. Do not write “See Resume.”****If accommodations or assistance is needed in completing this application, contact the individual who provided you with this application.** |
| **APPLICANT INFORMATION** |
| Name | Date |
| Home Phone | Cell Phone | Email |
| Address | City | State | Zip |
| Did a current employee refer you: No Yes, Who? |
| **POSITION AND AVAILABILITY** |
| Position Applying for | StatusFull-Time Part-Time Temporary | Maximum # of hours per week |
| Indicate which shifts you are available to work. Weekdays Evenings Weekends |
| Indicate which hours you are available to work each day. |
| Monday Tuesday Wednesday |     | Thursday Friday Saturday |  |     |  | Sunday Overnights Other |     |
| If hired, can you provide proof that you are eligible to work in the United States? Yes No |
| Have you ever been convicted of a crime, other than a minor traffic violation? Yes No If yes, please explain.(Convictions are not an absolute bar to employment but will be considered in relationship to the job requirements) |
| **EDUCATION AND/OR TRAINING** |
| Did you graduate from high school or receive a GED certificate? Yes No |
| School Name (College, Business, Nursing,Vocational or other) | Location (City and State) | Field | Did you Graduate? | Diploma or Degree Earned |
| Major | Minor |
|  |  |  |  | Yes No |  |
|  |  |  |  | Yes No |  |
|  |  |  |  | Yes No |  |
| Computer Skills, related volunteer experience, and other education, training or skills |

|  |
| --- |
| **EMPLOYMENT HISTORY*** Start with your current or last job – include armed forces service, relevant and self-employment.
* Any change of job title under the same employer should be considered a separate position.
 |
| May we contact this employer for a reference? Yes No Not Applicable |
| Employer | Telephone Number | Supervisor's Name |
| Address | City | State | Zip |
| Job Title | Dates Employed (indicate months & years)From To |
| Duties |
| Reason for Leaving |
| May we contact this employer for a reference? Yes No Not Applicable |
| Employer | Telephone Number | Supervisor's Name |
| Address | City | State | Zip |
| Job Title | Dates Employed (indicate months & years)From To |
| Duties |
| Reason for Leaving |
| May we contact this employer for a reference? Yes No Not Applicable |
| Employer | Telephone Number | Supervisor's Name |
| Address | City | State | Zip |
| Job Title | Dates Employed (indicate months & years)From To |
| Duties |
| Reason for Leaving |
| **Provide 3 Professional References**, we may contact who are **not related to you** and of which one is a former supervisor |
| **Name** | **Relationship** | **Phone** |
|  |  |  |
|  |  |  |
|  |  |  |

cfcc

|  |
| --- |
| State age if under 18: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Are you still a student? Yes No |
| Are you able to perform the essential functions of the job for which you are applying, with or without accommodation? Yes NoIf an accommodation is needed please state the accommodation that is needed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Were you previously employed with Advancing Opportunities? Yes NoIf yes, when: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reason for leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| List any friends, relatives, or acquaintance presently working for Advancing Opportunities:  |
| **Driving History****To be completed only for applicants apply for positon in which driving is essential function of the job.**Driver’s License State: \_\_\_\_\_\_\_\_ Driver’s license number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_List any tickets received, suspensions, or accidents that occurred over the last year. Please include approximate dates.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

We are committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of race, color, religion, creed, national origin or ancestry, sex, age, physical or mental disability, veteran or military status, genetic information, sexual orientation, marital status, or any other legally recognized protected basis under federal, state or local laws, regulations or ordinances. The information collected by this application is solely to determine suitability for employment, verify identity and maintain employment statistics on applicants.

Applicants with disabilities may be entitled to reasonable accommodation under the terms of the Americans with Disabilities Act and certain state or local laws. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing undue hardship on Advancing Opportunities. Please inform an Advancing Opportunities’ Human Resources Representative if you need assistance completing any forms or to otherwise participate in the application process.

**Please read each paragraph before signing**

- If I am employed, in consideration thereof, I agree to conform to the rules and regulations of Advancing Opportunities. I recognize, understand and agree that my employment and consideration can be terminated with or without cause and with or without notice, at any time at the option of Advancing Opportunities. I understand that no one, other than the Chief Executive Officer of Advancing Opportunities, has the authority to enter into any agreement for employment for a specified period of time, or to make any agreement contrary to the foregoing and that any such agreement must be in writing and signed by the CEO.

- I certify that the answers given here are true and complete to the best of my knowledge. In the event of employment, I understand that false, incomplete or misleading information given in my application or interview(s) shall result in discharge.

- I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I also agree to permit Advancing Opportunities to conduct substance abuse tests and any other background investigative procedures it deems appropriate with respect to my application, and in the event of hire, while, employed.

- I also understand and agree that employment may be subject to my taking a physical examination from an Advancing Opportunities physician and that in his/her opinion I must be physically and mentally able to perform the work for which I am applying or being considered, with or without accommodation. I understand, also, that I am required to abide by all rules and regulations of Advancing Opportunities.

- I understand that employment with Advancing Opportunities is also contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.

**The following two paragraphs are for E-version only)**

- I understand that the technical processing and transmission of the application, including my personal information, may involve a) transmission over various networks, including the transfer of this information to the United States and/or other countries for storage, processing and use by the Company, its affiliates, and their agents; and (b) changes to conform and adapt to technical requirements of connecting networks and devices. Accordingly, I agree to permit such parties to make such transmissions and changes, and hereby provide the necessary consent for the same. - I agree to all of the above and it is my intent to sign this employment application by checking the “I Accept” box below and electronically submitting this document to the Company. I understand that my signing and submitting this document in this fashion is the legal environment of having placed my handwritten signature on the submitted document.

☐ I Accept (By checking this box you are applying your signature and you agree to this Agreement)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

**For E-version only:** Save completed application and either:

E-mail to: hr@advopps.org **OR** Fax with cover sheet: 609-882-4022 **OR** Mail to:

Advancing Opportunities, 1005 Whitehead Road Ext., Ewing, NJ 08638, ATTN: Human Resources