

Crowley's Ridge Development Council, Inc. Employment Application

Applicants are considered for all positions without regard to race, sex, color, national origin, age, religion, handicap, or political affiliation.

Date of application: _____ Position applied for: _____

Last Name First MI Social Security Number

Address City State, Zip County

Home Phone Work Phone Emergency Number

Employment Status Section

Have you ever been employed with CRDC before? _____ Yes _____ No
If yes, give date _____ Position _____

Do you have transportation available? _____ Yes _____ No
Proof of auto liability will be required if job requires travel.

Can you travel if job requires it? _____ Yes _____ No

Have you been convicted of or pled guilty to a felony in the past 7 years?
_____ Yes _____ No

If yes, please explain: _____

On what date would you be available to work? _____

Are you available to work? ___ Full-time _____ Part-time _____ Temporary

May we contact your current employer? _____ Yes _____ No

May we contact your former employer(s)? _____ Yes _____ No

Nepotism

Do you have relatives that are currently employed with CRDC?
If yes list: _____ Yes _____ No
Name _____ Relationship _____

Do you have relatives that are employed through a contract with CRDC?
If yes list: _____ Yes _____ No
Name _____ Relationship _____

Do you have relatives that serve on the Board of Directors of CRDC?
If yes list: _____ Yes _____ No
Name _____ Relationship _____

This information is required to ensure compliance with CRDC's Nepotism Policy.

References

List three (3) references who are not related to you, and who have knowledge of your work qualifications, and who are not current or previous employer(s).

Name _____ Phone No. _____

Name _____ Phone No. _____

Name _____ Phone No. _____

Please read the following before signing application:

Check your answers to make sure all questions have been completed properly. If the job you are applying for requires a college degree or certification, a copy of your transcript, certificate or license may be required as a condition of employment.

I, the below-signed individual, hereby declare that the above information is true and factual. I understand that if I am hired my employment is for no definite period of time and I may be terminated at any time.

I understand that certain jobs may require the following as a condition of employment:

- *An acceptable drivers safety record
- *Proof of the minimum liability coverage under Arkansas State Law
- *A physician's statement stating that I am physically able to perform the job duties
- *A negative pre-employment drug screen result

I understand that I will be required to provide proof of eligibility to work in the United States pursuant to the Immigration Reform and Control Act of 1986 as a condition of employment.

I understand that any false, misleading or incomplete statement could lead to my dismissal as an employee or rejection as an applicant.

Signature of Applicant _____ Date _____

Applications are valid for thirty (30) days.

FILL OUT ITEMS COMPLETELY AND CORRECTLY.

Educational History

Did you graduate from High School? ___ Yes ___ No

If not, do you have a GED? ___ Yes ___ No

	Elementary	High School	College/Univ.	Grad/Professor
School Name				
Years Completed (Circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree	XXX			
Course of Study				

List professional license(s) relevant to position(s) for which you are applying. Give type of license, license number, date of expiration, and state. _____

List other experience that you believe would qualify you for employment with CRDC (self-employment, community activities, work with social or religious organizations, student leadership activities, etc.)

List any other skills or abilities you would like CRDC to be aware of. _____

Work History

List your prior work experience beginning with your most recent employer. Use additional paper if necessary.

Employer _____

Address _____

Supervisor _____

Phone Number: _____

Employed from _____ to _____

+++++

Employer _____

Address _____

Phone Number _____

Supervisor _____

Employed from _____ to _____

+++++

Employer _____

Address _____

Supervisor _____

Phone Number _____

Employed from _____ to _____

Type of Business _____

Job Title _____

Specific Duties _____

Current Salary: _____

Reason for Leaving _____

+++++

Type of Business _____

Job Title _____

Specific Duties _____

Current Salary _____

Reason for Leaving _____

+++++

Type of Business _____

Job Title _____

Specific Duties _____

Current Salary _____

Reason for Leaving _____

Applicants Release

I hereby authorize Crowley's Ridge Development Council, Inc. to inquire and ask former employers and references information regarding dates of work, quality of work, positions held, salary, attendance habits, workmanship, cooperation, willingness to rehire, reason for leaving, etc.

I do hereby release the mentioned individual companies or institutions, including Crowley's Ridge Development Council, Inc. from all liability for any damage whatsoever in furnishing and using such information.

I authorize a photocopy of this authorization to be furnished the aforementioned when asked for information relative to suitability for employment.

Signature of Applicant

Date