



# EMPLOYMENT APPLICATION

## APPLICANT INFORMATION

DATE	DESIRED HOURLY RATE
LAST NAME	FIRST NAME
	MIDDLE NAME
PRESENT ADDRESS (STREET, CITY, STATE, ZIP CODE)	EMAIL ADDRESS
PHONE NUMBER	REFERRED BY
POSITION APPLIED	DATE AVAILABLE

## DAYS AND HOURS AVAILABLE

Specify Hours available each day of the week	S	M	T	W	T	F	S
Are you able to frequently lift up to 50 lbs. and occasionally lift up to 75 lbs. or more with or without reasonable accommodation?	YES ___ NO ___						
If required for position, do you have a valid driver's license?	YES ___ NO ___						
If YES, State of issuance, license #, and expiration date:							
How did you learn about this employment opportunity? Check all that apply: Newspaper Ad ___ Walk-in ___ Internet Ad: ___ Habitat Website ___ Referral by employee) please list employee name) _____ Other: _____							

## EMPLOYMENT RECORD

If you are presently employed, may we contact this employer? ___YES ___NO		
EMPLOYER	TELEPHONE	SUPERVISOR'S NAME
ADDRESS	DATES EMPLOYED	BASE SALARY OR WAGE
	----- TO -----	START -----
JOB TITLE	MO    YR    MO    YR	CURRENT OR END -----
NATURE OF DUTIES		DATE OF LAST INCREASE
REASON FOR LEAVING OR SEEKING CHANGE OF POSITION		

EMPLOYER	TELEPHONE	SUPERVISOR'S NAME
ADDRESS	DATES EMPLOYED -----TO-----	BASE SALARY OR WAGE START -----
JOB TITLE	MO    YR    MO    YR	END -----
NATURE OF DUTIES		DATE OF LAST INCREASE
REASON FOR LEAVING OR SEEKING CHANGE OF POSITION		
EMPLOYER	TELEPHONE	SUPERVISOR'S NAME
ADDRESS	DATES EMPLOYED -----TO-----	BASE SALARY OR WAGE START -----
JOB TITLE	MO    YR    MO    YR	END -----
NATURE OF DUTIES		DATE OF LAST INCREASE
REASON FOR LEAVING OR SEEKING CHANGE OF POSITION		

EDUCATION				
SCHOOL	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	GRADUATED	COURSE OF STUDY AND DEGREES RECEIVED
HIGH SCHOOL			<input type="checkbox"/> YES	
			<input type="checkbox"/> NO	
COLLEGE			<input type="checkbox"/> YES	
			<input type="checkbox"/> NO	
OTHER (SPECIFY)			<input type="checkbox"/> YES	
			<input type="checkbox"/> NO	

REFERENCES				
CHECK ONE	<input type="checkbox"/> OCCUPATIONAL REFERENCE <input type="checkbox"/> PERSONAL REFERENCE	NAME	OCCUPATION	YEARS ACQUAINTED
ADDRESS				TELEPHONE NUMBER
CHECK ONE	<input type="checkbox"/> OCCUPATIONAL REFERENCE <input type="checkbox"/> PERSONAL REFERENCE	NAME	OCCUPATION	YEARS ACQUAINTED
ADDRESS				TELEPHONE NUMBER
CHECK ONE	<input type="checkbox"/> OCCUPATIONAL REFERENCE <input type="checkbox"/> PERSONAL REFERENCE	NAME	OCCUPATION	YEARS ACQUAINTED
ADDRESS				TELEPHONE NUMBER

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A MISDEMEANOR INVOLVING ANY VIOLET ACT, USE OR POSSESSION OF A WEAPON OR ACT OF DISHONESTY FOR WHICH THE RECORD HAS NOT BEEN SEALED OR EXPUNGED?

YES     NO

IF YES, PLEASE BRIEFLY DESCRIBE THE NATURE OF THE CRIME(S), THE DATE AND PLACE OF CONVICTION AND THE LEGAL DISPOSITION OF THE CASE. THIS ORGANIZATION WILL NOT DENY EMPLOYMENT TO ANY APPLICANT SOLELY BECAUSE THE PERSON HAS BEEN CONVICTED OF A CRIME. THE ORGANIZATION HOWEVER, MAY CONSIDER THE NATURE, DATE AND CIRCUMSTANCES OF THE OFFENSE AS WELL AS WHETHER THE OFFENSE IS RELEVANT TO THE DUTIES OF THE POSITION APPLIED FOR.


ARE YOU CURRENTLY OUT ON BAIL, THE SUBJECT OF A CURRENT WARRANT FOR ARREST OR RELEASED ON YOUR OWN RECOGNIZANCE PENDING TRIAL?

YES     NO

## AUTHORIZATION (Applicant, Read Carefully)

*The Immigration Reform and Control Act of 1986 requires employers to verify that persons are eligible to work in the United States. If employed, I understand that I would be required to provide documents within three days of employment which establish identity and employment eligibility (e.g., state-issued driver's license or state-issued identification card, Social Security Card, United States Passport).*

*I certify that the facts set forth in this application are true and complete and agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date. I authorize the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.*

*I understand that this application is not, and is not intended to be, a contract of employment; if hired, the employment relationship between Habitat for Humanity and me is terminable at will, with or without cause, by either Habitat for Humanity or me. If employed by Habitat for Humanity, I will comply with all rules, regulations and terms and conditions of employment by the firm as they may from time to time be changed or modified with or without notice to me.*

APPLICANT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

### EQUAL EMPLOYMENT OPPORTUNITY

This notice is written pursuant to the Equal Employment Opportunity Order at Executive Order 11246 and the implementing regulations at 41 CFR 60.

All qualified applicants will receive consideration for employment without regard to national origin, race, color, religion, age, sex, sexual orientation, marital status, individuals with disabilities, and equally to disabled veterans and veterans of the Vietnam Era.

## Habitat for Humanity-Greater Columbus

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