



APPLICATION FOR EMPLOYMENT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

LOCATION(S) APPLIED FOR: Sioux City Grand Island Spencer Des Moines Omaha

Name _____
Last First Middle

Address _____
Street City State Zip Code

Phone _____ Cell/Other _____ E-mail _____

Position applied for _____ Date of application _____

REFERRAL SOURCE (Please check the appropriate category and name the source where applicable)

- Walk-in School _____
- Employee _____ Job Fair _____
- Advertisement _____ Staffing/Employment Agency _____
- CMBA's Website Other _____

If necessary, best time to call you at home is _____ am pm

May we contact you at work? Yes No

If yes, work number: _____ Best time to call _____ am pm

Have you submitted an application here before? Yes No

If yes, give date(s) and position(s) _____

Are you legally eligible to work in the United States? Yes No

Date available to start _____

Type of employment desired: Full-Time Part-Time Seasonal/Temporary

Will you relocate if job requires it? Yes No

Have you ever been convicted of or pled guilty to a felony conviction? Yes No

If yes, please provide date(s) and details _____

**A conviction does not automatically disqualify you from consideration of employment.*

Have you ever been terminated from employment or been asked to resign by an employer? Yes No

If yes, please explain _____

EDUCATIONAL BACKGROUND

Starting with your most recent school attended, provide the following information:

SCHOOL (INCLUDE CITY & STATE)	YEARS COMPLETED	DEGREE COMPLETED	MAJOR/MINOR

EMPLOYMENT HISTORY

Starting with your most recent employer, provide the following information:

EMPLOYER _____ PHONE _____

STREET ADDRESS _____ CITY _____ STATE _____

STARTING JOB TITLE/FINAL JOB TITLE _____

IMMEDIATE SUPERVISOR & TITLE (FOR MOST RECENT POSITION HELD) _____ MAY WE CONTACT FOR REFERENCE? Yes No

WHY DID YOU LEAVE? _____

SUMMARIZE THE TYPE OF WORK PERFORMED & JOB RESPONSIBILITIES _____

EMPLOYER _____ PHONE _____

STREET ADDRESS _____ CITY _____ STATE _____

STARTING JOB TITLE/FINAL JOB TITLE _____

IMMEDIATE SUPERVISOR & TITLE (FOR MOST RECENT POSITION HELD) _____ MAY WE CONTACT FOR REFERENCE? Yes No

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IMMEDIATE SUPERVISOR & TITLE (FOR MOST RECENT POSITION HELD) _____ MAY WE CONTACT FOR REFERENCE? Yes No

WHY DID YOU LEAVE? _____

SUMMARIZE THE TYPE OF WORK PERFORMED & JOB RESPONSIBILITIES _____

SKILLS AND QUALIFICATIONS

List any special training, skills, licenses and/or certificates that may assist you in performing the position you are applying.

Computer Skills (Check the appropriate boxes; include software titles and years of experience)

- CADD Program(s) _____ Years _____
- Word Processing _____ Years _____
- Spreadsheet _____ Years _____
- Presentation _____ Years _____

REFERENCES

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

NAME	TITLE	RELATIONSHIP TO YOU	TELEPHONE	EMAIL

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, résumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

SIGNATURE OF APPLICANT _____ DATE _____