

Advocates for Children, Inc.
“A CASA Program”
Serving Orange, Hardin, Jasper, Newton, Tyler, Sabine & San Augustine Counties
APPLICATION FOR EMPLOYMENT
Please attach your Resume!

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, disability or national origin.

Date: _____

Employment Desired:

Position: _____ Date you can start: _____

Salary desired: _____ Type of employment (Mark one): Full-time _____
Part-time _____ Summer _____ Temporary _____

Have you ever applied to this company before? (Mark one) Yes _____ No _____

Where: _____ When? _____

Personal Information:

Last Name: _____ First Name: _____ Middle Name: _____

Address: _____

(include Number, street, city, state, zip code)

Social Security Number: _____

Home Telephone Number: _____

Referred by: _____

Education:

1. High School Attended & Location: _____

Number of Years completed: _____ Did you Graduate? Yes _____ No _____

2. College Attended & Location: _____

Number of Years completed: _____ Did you Graduate? Yes _____ No _____

3. Trade, Business or Correspondence School Attended & Location: _____

Number of Years completed: _____ Did you Graduate? Yes _____ No _____

General:

Other Special Courses or Training: _____

Experience/Skills Related to the Position for Which You are Applying: _____

Office/Secretarial Applications:

Skill / Aptitude Years of Experience Words Per Minute Software Used

1. Typing: _____

2. Shorthand: _____

3. Word Processing: _____

4. Computer: _____

List secretarial training courses completed & any other training which may be helpful in considering your application. _____

Employment History (List Present or Most Recent Positions First/Use additional paper if needed)

Can these be contacted? Yes _____ No _____

1. Name of Employer & Address (Number, street, city, state, zip code):

Phone: _____ Type of Business: _____
Department: _____ Your position: _____
Duties: _____
Name & Position of Immediate Supervisor: _____
Date Employed (day, mo. & yr.): _____ Date Left: (day, mo. & yr.) _____
Starting Salary: _____ Final Salary: _____
Reason for Leaving: _____

2. Name of Employer & Address (Number, street, city, state, zip code):

Phone: _____ Type of Business: _____
Department: _____ Your position: _____
Duties: _____
Name & Position of Immediate Supervisor: _____
Date Employed (Day, mo. & yr.): _____ Date Left: (day, mo. & yr.) _____
Starting Salary: _____ Final Salary: _____
Reason for Leaving: _____

3. Name of Employer & Address (Number, street, city, state, zip code):

Phone: _____ Type of Business: _____
Department: _____ Your position: _____
Duties: _____
Name & Position of Immediate Supervisor: _____
Date Employed (Day, mo. & yr.): _____ Date Left: (day, mo. & yr.): _____
Starting Salary: _____ Final Salary: _____
Reason for Leaving: _____

State any additional information you feel may be helpful to us in considering your application:

Other Experience: In this section, list any job experience not listed above that most directly relates to the job for which you are now applying.

Name of Employer & Address (Number, street, city, state, zip code):

Phone: _____ Type of Business: _____
Department: _____ Your position: _____
Duties: _____
Name & Position of Immediate Supervisor: _____
Date Employed (day, mo. & yr.): _____ Date Left: (day mo. & yr.): _____
Starting Salary: _____ Final Salary: _____
Reason for Leaving: _____

I certify that the information provided is true and correct: Signature _____