

Application for Employment

We consider applicants for all positions on the basis of qualifications and without regard to race, color, national origin, citizenship, religion, sex, pregnancy, age, disability, genetic information/history, military status, use of lawful products during non-work hours and/or any other legally protected characteristic or condition.

This application will be considered active for 60 days from the date it is submitted. Consideration for employment after 60 days requires a new application.

Date of Application: How did	you hear about this position?
Position(s) applied for:	
I can work (check all that apply): Full-time	Part-time Nights Weekends
When are you available to begin work?	
I. Personal Information	
Name:	Primary phone:
If your records are listed under another name,	provide name:
Street Address:	
Email address:	
Are you legally eligible to work in the United St (If hired, you will be required to provide proof U.S.) Are you at least 18 years old?	rates? Yes No of identify and eligibility to legally work in the
Have you ever worked here before?	No
If yes, when? (Give dates)	Job Title:

II. Work Record

Please provide the requested employment information, starting with your most current position. If you need more room, you may attach an addendum.

Name of Employer:	Supervisor's Name/Title:			
Full Address/Phone Number of Employer:				
Position(s) Held:	Dates Employed/Reason for Leaving:			
Describe the Work Performed:				
May we contact this organization for a reference of the second of the se				
Name of Employer:	Supervisor's Name/Title:			
Full Address/Phone Number of Employer:				
Position(s) Held:	Dates Employed/Reason for Leaving:			
Describe the Work Performed:				
May we contact this organization for a reference of the second of the se	e? Yes No			
Name of Employer:	Supervisor's Name/Title:			
Full Address/Phone Number of Employer:				
Position(s) Held:	Dates Employed/Reason for Leaving:			

Describe the Work Performed:					
May we contact this organization	on for a reference? 🗌 Yes 🔃 I	No			
If no, why not?					
III. Education					
	training which you believe quali	fies you for the position you are			
•	on description before providing t				
	T /-				
High School or GED:	City/State:	Diploma or GED Received?			
		☐ Yes ☐ No			
		If no, what is the highest grade completed?			
College Name:	City/State:	Degree? Yes No			
		Major(s):			
		, major (5).			
College Name:	City/State:	Degree? Yes No			
		Major(s):			
Related Training:	Where taken:	Certification? Yes No			
nciated framing.	Where taken.				
		Topics Studied:			
· ·	position description before answ				
G .	lls, or traits not previously mention	oned that would help you to			
perform the essential functions of this position:					

IV. References

If you have not provided at least three employer references in Section II, please provide three references (other than relatives) that you have known for at least three years. Do not repeat your employer references here. You may include others with whom you have worked.

Name:	Occupation:	
Relationship to You:	How long have you known this person?	
Email Address:	Phone Number(s):	
Name:	Occupation:	
Relationship to You:	How long have you known this person?	
Email Address:	Phone Number(s):	
Name:	Occupation:	
Relationship to You:	How long have you known this person?	
Email Address:	Phone Number(s):	

I understand that, by accepting this application, The Center for Craft, Creativity & Design (CCCD) is in no way obligated to provide me with employment, and that I am not obligated to accept employment if offered. Furthermore, if employed, I understand that I am employed at-will, which means that CCCD and/or I can end the employment relationship at any time with or without notice or cause, consistent with applicable law.

I certify that the information contained in this application is true and complete to the best of my knowledge. I understand that any falsified statement or important omission of fact on either this application or during the pre-employment process will result in my application being rejected or, if I am hired, in my employment being terminated.

I also understand that any offer of employment is conditioned upon the verification of my information. I authorize CCCD to verify any and all information provided on this application and/or during the pre-employment process and I will, upon request, sign other necessary consent forms. I hereby release CCCD, and those who provide information about me, from any/all liability of whatever kind and nature which, at any time, could result from obtaining, and/or having an employment decision based on, such information.

Applicant's Signature:	 	
Date:		