

Employment Application

Equal Opportunity/AA Employer

SUBMIT APPLICATION BY:

Fax (888) 906-7488
Email jobs@communityactionam.org
Mail Attention: Human Resources

Community Action Alger Marquette 1125 Commerce, Marquette, MI 49855

FOR INFORMATION ON POSTIONS:

Website www.communityactionam.org

Date of Application			
Position(s) applying for			
Type of Employment: Full-	time Part-time Sub Tem	ıp	
First Name	_LastName		MI
Address	City	State	ZIP
Home Phone	Cell Phone		
Email Address			
Were you previously employe date	d with Community Action Alger Marqu — felony in the last seven (7) years?	uette? If yes, give	
job related, but does not bar y If you answered yes to the corexplain:			
Are you a Head Start Parent?_	If yes, when was your child	d enrolled in Head Start?	
	r Marquette currently employ anyone rd?		If yes, what
Are you currently related to an Directors?	ny person on the Community Action A	lger Marquette Board of	

Have you lived in Michigan for the past ten (10) years? If no, what state(s) did you reside in and for how long?						
Prior Employment Information – List your last three (3) employers, starting with the most recent.						
Company Name	May we contact this employer? Y N					
Company Phone	Supervisor's Name					
Company Start Date	Company Leave Date					
Highest Wage						
Why did you leave this employer?						
Company Job Titles/Duties						
	Manage and this analysis of N. N.					
-	May we contact this employer? Y N					
	Supervisor's Name					
-	Company Leave Date					
Highest Wage						
Company Name	May we contact this employer? Y N					
Company Phone	Supervisor's Name					
Company Start Date	Company Leave Date					
Highest Wage						
Why did you leave this employer?						
Please explain any period of time	not accounted for in your employment information.					
-						

List all special skills which you want us to consider in evaluating your qualifications (ie. Degrees, Computer skills, training, certifications, etc.)						
Education Information						
School Name	Type of School					
School City		_School State	School Zip			
School Degree			Currently attending this school?			
# of years attended	Graduated?	GPA	-			
School Name		Type of S	chool			
School City	School State		_School Zip			
School Degree			Currently attending this school?			
# of years attended	Graduated?	GPA	-			
School Name		Type of S	chool			
School City	School StateSchool Zip		_School Zip			
School Degree			Currently attending this school?			
# of years attended	Graduated?	GPA	-			
Professional References						
List individuals who are not re These may be individuals from			te your professional knowledge and ability.			
Name	Phone		Email			
Name	Phone		Email			
Name	Phone		Email			

IMPORTANT, PLEASE READ CAREFULLY

Applicant/Employee Verification, Authorization and Release

I authorize Community Action Alger Marquette to investigate all statements contained in this application (and accompanying resume, if any). I also authorize Community Action Alger Marquette to conduct a background check which may include, without limitation, contacting past employers and references, conducting an investigation of my personal history, a Department of Human Services Clearance, a National Sex Offenders Registry Clearance and a criminal background check

I understand that applicants who misrepresent or omit any material facts on this application or during any subsequent interview may not be hired or if hired, and found to have made a misrepresentation may be terminated immediately and I agree that Community Action Alger Marquette shall not be held liable in any respect if I am not hired or terminated for that reason. If employed, I agree to observe all rules, regulations, policies and procedures of Community Action Alger Marquette.

All Community Action Alger Marquette employees are at-will employees.

Neither this employment application nor any of the company's policies or procedures shall be considered a contract or guarantee of employment or continuation of employment. I understand this application is only current for 180 days. At the conclusion of this time, if I have not heard from Community Action Alger Marquette and still wish to be considered for employment, it will be necessary to update this application.

Printed Name	 	
Applicant Signature		
Applicant dignature	 	
Date Signed		