Date:

Employment Application Brighter Future Charity

Please Print this form, Fill it out, and Fax it to: 800-314-5908

We appreciate the time you spend completing this application. Please complete all portions of this application. Brighter Future Charity, in accordance with state and federal laws, does not discriminate on the basis of age, race, religion, color, sex, national origin, ancestry, mental or physical disability, veteran status, citizenship, or any other protected classification. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the Personnel Office.

(Please Type or Print)

Name:	Last	First	I	Middle	
Mailing Address:	Street	City	State	Zip Code	
Telephone #'s:	Home	Cell			
E-Mail Address:	1				
Have you previously filed an application?			Yes (Da	te) N	No
Have you ever been employed with the City?			Yes (Da	te) N	No
Are you prevented from lawfully becoming employed in this country because of VISA or Immigration Status? (Proof of citizenship or immigration status will be required upon employment)			Yes	N	No
On what date would you be available for work?			Date:		
Can you travel if the job requires it?			Yes	1	No
Have you been convicted of a felony within the last 7 years? (Conviction will not necessarily disqualify an applicant from employment)			Yes	1	No
If yes please explain:					
Are you 18 years of age or older?			Yes	1	No

Education				
Name of High School				
Years Completed				
Diploma				
Name of College				
Course of Study				
Years Completed				
Degree				
Name of College				
Course of Study				
Years Completed				
Degree				
Other-				
Describe any specialized training				
Describe any specialized training, apprenticeship, skills and extra-curricular				
activities.				
activities.				
Describe any job-related training received in				
the United States military.				
List any professional, trade, business or civic				
activities and offices held. (You may exclude				
membership that would reveal gender, race,				
national origin, age, ancestry, disability or				
other protected status.				

Employment Experience						
Start with your present or last job. Include any job-related military service assignments and						
volunteer activities. You may exclude organizations that indicate race, color, religion, gender,						
		cted status. Attach additional pages if necessary.				
Employer:	*	Permission to contact? Y/N				
Address:		·				
Telephone:		Job Title:				
Supervisor:		Reason for leaving:				
Employed: From:	To:	Final rate of pay:				
Duties:						
E		Denne incine to constant? X/NI				
Employer:		Permission to contact? Y/N				
Address:						
Telephone:		Job Title:				
Supervisor:		Reason for leaving:				
Employed: From:	To:	Final rate of pay:				
Duties:						
Employer:		Permission to contact? Y/N				
Address:		remission to contact? 1/N				
		Job Title:				
Telephone: Supervisor:						
Employed: From:	To:	Reason for leaving: Final rate of pay:				
Duties:	10.	Final fate of pay.				
Duties.						
Employer:		Permission to contact? Y/N				
Address:						
Telephone:		Job Title:				
Supervisor:		Reason for leaving:				
Employed: From:	To:	Final rate of pay:				
Duties:						
Employer:		Permission to contact? Y/N				
Address:						
Telephone:		Job Title:				
Supervisor:		Reason for leaving:				
Employed: From:	To:	Final rate of pay:				
Duties:						

Additional Information

Knowledge and Specialized Skills:

What type of computers and software have you used?

What type of heavy equipment have you used?

Other qualifications specific to this position?

List any certifications you have received:

List any family members employed by the City, family members means the spouse of the employee; a life partner or person cohabitating with the employee; a child, including stepchild and/or an adopted child of the employee; a parent, step-parent, sibling, or grandparent of the employee or a parent or sibling of the employees' spouse.

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

Professional References

Relationship:
Relationship:
Relationship:

Note to Applicants: DO NOT ANWER THIS QUESTION UNLESS YOU HAVE READ THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the activities described in the job description for which you have applied?

Circle One: YES NO

APPLICANT'S STATEMENT

I certify the information provided in my application and resume (if attached) is true and complete to the best of my knowledge.

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, resume 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 Brighter Future Charity 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.

This application for employment shall be considered active for a period of time not to exceed one year. If the applicant is not selected for this position they must submit a new application for consideration for other positions that may be advertised.

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 the federal immigration laws require me to complete an I-9 Form in this regard.

Brighter Future Charity does not tolerate unlawful discrimination in its employment practices. No questions on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. Brighter Future Charity likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. Brighter Future Charity likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or customer). Brighter Future Charity takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

In the event of employment, I understand that false or misleading information given in my application, resume (if attached) or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Brighter Future Charity.

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. Please type your name below to confirm that you have read and accept this Applicant Statement.

Applicant Name: _____

Signature of Applicant: ____

Date: _____

Please *sign* or *type* your name as your electronic signature