



**Waco Foundation APPLICATION FOR EMPLOYMENT**

*An Equal Opportunity Employer – All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.*

**PERSONAL INFORMATION**

*Incomplete information could disqualify you from further consideration. Please complete all fields.*

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Mobile Phone # \_\_\_\_\_

Are you eligible to work in the U.S.? Yes No

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.) Yes No

Have you ever been terminated from employment or asked to resign by an employer? **If yes**, please provide company names and details. Yes No

Can you work overtime, including weekends? Yes No

Are you able to perform the functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

**EMPLOYMENT DESIRED**

Date you can start \_\_\_\_\_ Hourly Rate/Salary desired \_\_\_\_\_

Are you currently employed? Yes No If so may we inquire of your present employer?

**REFERRAL SOURCE**

How did you hear about us? \_\_\_\_\_

Have you ever worked for this company before? Yes No Please explain:

Do you know anyone who works for our company? Yes No If yes, who?

\_\_\_\_\_  
**EDUCATION**

Name and location of school	No. of yrs. Attended	Degree Received	Subjects studied/Major
<u>High School</u>			
<u>College or University</u>			
<u>Trade, Business or Correspondence School</u>			

**EMPLOYMENT HISTORY** Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

From	To	Employer Name	Telephone (____) ____-____
<b>Job Title</b>		<b>Address</b>	

(Continued)

<b>Immediate Supervisor &amp; Title</b>	<b>Summarize the nature of work performed and job responsibilities</b>
<b>Reason for leaving</b>	

<b>From</b>	<b>To</b>	<b>Employer Name</b>	<b>Telephone</b> (____) ____-____
<b>Job Title</b>		<b>Address</b>	
<b>Immediate Supervisor &amp; Title</b>	<b>Summarize the nature of work performed and job responsibilities</b>		
<b>Reason for leaving</b>			

<b>From</b>	<b>To</b>	<b>Employer Name</b>	<b>Telephone</b> (____) ____-____
<b>Job Title</b>		<b>Address</b>	

(Continued)

<b>Immediate Supervisor &amp; Title</b>	<b>Summarize the nature of work performed and job responsibilities</b>
<b>Reason for leaving</b>	

<b>From</b>	<b>To</b>	<b>Employer Name</b>	<b>Telephone</b> (____) ____-____
<b>Job Title</b>		<b>Address</b>	
<b>Immediate Supervisor &amp; Title</b>	<b>Summarize the nature of work performed and job responsibilities</b>		
<b>Reason for leaving</b>			

**Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.**

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**REFERENCES** Give the names of three persons not related to you, whom you have known at least three (3) years.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

**Please read carefully before signing**

Waco Foundation is an equal opportunity employer. Waco Foundation does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Waco Foundation to hire me. If I am hired, I understand that either Waco Foundation or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Waco Foundation has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Waco Foundation true and complete information on this application. No requested information has been concealed. I authorize Waco Foundation to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date \_\_\_\_\_ Signature \_\_\_\_\_