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| **Application for Employment**  Crawford County Recreation Center | | | | We are an equal Opportunity Employer and committed to excellence through diversity. | | | Please print or type. The application must be fully completed to be considered. Please complete each section even if you attach a resume. | |
| Personal Information | | | | | | | | |
| Name | | | | | | | | |
|  | | | | | | | | |
| Address | | City | | | | State | | Zip |
|  | |  | | | |  | |  |
| Phone number | | Email address | | | | | | |
|  | |  | | | | | | |
| Are you legally eligible to work in the US? | |  | Are you a veteran? | | | | | |
| Yes | No |  | Yes | | No | | | |

If selected for employment, are you willing to submit to a background check and drug screening?

Yes  No

|  |  |  |
| --- | --- | --- |
| Position | | |
| Position you are applying for:   Manager Customer Facing Instructor | Available Start date? | Can you work weekends?  Yes  No |

Employment desired

Full time  Part time  Seasonal/Temporary

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Education | | | | |
| School name | Location | Years attended | Degree received | Major |
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| --- | --- | --- | --- | --- | --- |
| References (business and professional only) Note: Please list at least 2 references | | | | | |
| Name | Title | | Company | | Phone |
|  |  | |  | |  |
|  |  | |  | |  |
|  |  | |  | |  |
|  |  | |  | |  |
| Employment History Note: If you have never been employed, write n/a | | | | | |
| Employer (1) | Job title | | | Dates employed | |
|  |  | | |  | |
| Work phone | Supervisor | | |  | |
|  |  | | |  | |
| Address | City | State | | Zip | |
|  |  |  | |  | |
| Employer (2) | Job title | | | Dates employed | |
|  |  | | |  | |
| Work phone | Supervisor | | |  | |
|  |  | | |  | |
| Address | City | State | | Zip | |
|  |  |  | |  | |
| Employer (3) | Job title | | | Dates employed | |
|  |  | | |  | |
| Work phone | Supervisor | | |  | |
|  |  | | |  | |
| Address | City | State | | Zip | |
|  |  |  | |  | |
| Employer (4) | Job title | | | Dates employed | |
|  |  | | |  | |
| Work phone | Supervisor | | |  | |
|  |  | | |  | |
| Address | City | State | | Zip | |
|  |  |  | |  | |
| Employer (5) | Job title | | | Dates employed | |
|  |  | | |  | |
| Work phone | Supervisor | | |  | |
|  |  | | |  | |
| Address | City | State | | Zip | |
|  |  |  | |  | |

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| --- | --- |
| Signature Disclaimer Note: If you have never been employed, write n/a | |
| I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my employment being terminated. | |
| Name (please print) | Signature |
| Date |