APPLICATION FOR EMPLOYMENT

PLEASE PRINT LEGIBLY

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.



314 E Jefferson Street, Plymouth, IN 46563 P: 574.936.0660|jonh@bgcmco.org

Position(s) Applying For:			Date of Applic	_ Date of Application:			
First Name:	Middle:		Last:				
Address:	City:		State:	Zip Code:			
Telephone Number:	Cell:		Email:				
Have you ever been employed w	th us before? Y / N	If yes, give date	es and position(s):				
Are you legally eligible for emplo	ment in this country?	Y/N Date a	vailable for emplo	yment:/	/		
Are you able to meet the attenda	nce requirements for tl	he position(s)?	Y/N Desired	oay: \$			
Check all types of employment de	esire d: 🗆 Full-time	□ Part-time	□ Temporary [Seasonal	Internship		
If seeking full-time are you open	to working part-time?	Y/N If yes,	minimum # of hou	rs needed per we	ek?		
Have you ever pleaded "guilty" o	r "no contest" to, or be	en convicted o	f a crime? Y / N				
If yes, please provide dates and d	etails:						
Answering "YES" to this question does not constitute an auto	matic bar to employment. Factors such as	date of the offense, serious	sness, nature of the violation, and	position applied for will be tak	en into consideration.		

Skills and Qualifications

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

EDUCATIONAL BACKGROUND

High School:	n School: Location:		Number of Years Completed:		
Status: Graduated	□ Did not Graduate	□Still Attending	Course of Study/Degree Earned:		
College:	Location:		Number of Years Completed:		
Status: Graduated	□Did not Graduate	□Still Attending	Course of Study/Degree Earned:		
Other:	ther: Location:		Number of Years Completed:		
Status: Graduated	\Box Did not Graduate	□Still Attending	Course of Study/Degree Earned:		
REFERENCES	(Must be at least 2 pro	fessional and 1 pers	onal references)		
Name:		Title:	Number of Years Known:		
Phone:		Relationship:			
Name:		Title:	Number of Years Known:		
Phone:		Relationship:			
Name:		Title:	Number of Years Known:		
Phone:		Relationship:			

EMPLOYMENT HISTORY

	ur (4) employers, assignments, or volunteer activities, sta			_	
	Job Title:				
	City:				
	Hourly Rate/Salary – Start: \$				
	Title:				
Summarize nature of work perfor	rmed and job responsibilities:				
	Job Title:		From: To:		
			State: Zip Code:		
	Hourly Rate/Salary – Start: \$				
	Title:				
	rmed and job responsibilities:				
 Reason for leaving:					
Employer #3·	Job Title:		From:	To [.]	
	City:				
	Hourly Rate/Salary – Start: \$				
	med and job responsibilities:				
Reason for leaving:					
Employer #4:	Job Title:		From:		
	City:				
	Hourly Rate/Salary – Start: \$				
	rmed and job responsibilities:				
Reason for leaving:					
I understand that any information provided by me that is found to discharge me from the employer's service, whenever it is discover I expressly authorize, without reservation, the employer, its repre authorities, and educational institutions and to otherwise verify th	ind secure work with the employer is true, complete, and correct. b be false, incomplete, or misrepresented in any respect, will be su red. sentatives, employees, or agents to contact and obtain informatio he accuracy of all information provided by me in this application, re for seeking, gathering and using such information in the employm	n from all references (persona esume, or job interview. I her	Il or professional), empl eby waive any and all ri	oyers, public agencies, li ghts and claims I may ha	icensing ave

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

I understand that the application remains current for 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, without cause and without prior notice, except as may be required for law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral, or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

With my signature below, I certify that I have read, and fully understand and accept all terms of foregoing Applicant Statement.