



GENERAL APPLICATION FORM

I. Applying for:

- Teacher/ Tutor Instructional Coordinator Administrative Assistant Other

II. Name of Applicant:

PLEASE PRINT (LAST, M.I., FIRST)

III. Supporting Evidence:

- a. In 2-3 sentences, please indicate below what aspect/ feature of our website (www.mi-ramp.org) is most significant or appealing to you.

- b. In 2-3 sentences, indicate below why you feel you are the most qualified candidate for this position.

- c. Enclose/ attach current resume'/cv

IV. After completing pages 1 through 3, submit documents which must include resume' (min. 4 pgs total)

V. Please submit via one of the following methods:

Email to: tcgilmer45@gmail.com

Fax to: (248) 893-7399

Mail to: MI-RAMP

 % Dr. T. Carter Gilmer

 29428 Valley Bend

 Farmington Hills MI 48331

Application For Employment

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
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Phone number	Email address
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Are you legally eligible to work in the US? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you a veteran? Yes <input type="checkbox"/> No <input type="checkbox"/>
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If selected for employment are you willing to submit to a background check?

Yes No

Position

Position you are applying for	Available start date	Desired pay
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Employment desired

Full time Part time Seasonal/Temporary

Education

School name	Location	Years attended	Degree received	Major

References (business and professional only)

Name	Title	Company	Phone

Employment History

Employer (1)	Job title		Dates employed
Work phone	Starting pay rate		Ending pay rate
Address	City	State	Zip
Employer (2)	Job title		Dates employed
Work phone	Starting pay rate		Ending pay rate
Address	City	State	Zip
Employer (3)	Job title		Dates employed
Work phone	Starting pay rate		Ending pay rate
Address	City	State	Zip
Employer (4)	Job Title		Dates employed
Work phone	Starting pay rate		Ending pay rate
Address	City	State	Zip
Employer (5)	Job title		Dates employed
Work phone	Starting pay rate		Ending pay rate
Address	City	State	Zip

Signature Disclaimer

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	