

# Application For Employment



APPLICANT INFORMATION								
Last Name			First			M.I.	Date	
Street Address					Apartment/Unit #			
City			State			ZIP		
Phone				E-mail Address				
Date Available				Are you available to work:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Weekends <input type="checkbox"/> Temporary			
Times Available to work								
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
Position Applied for								
Are you eligible to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	<i>If selected for a position at CASA, proof of eligibility must be provided.</i>			
Have you ever filed an application here before?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?			
Have you ever worked for this company?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?			

BACKGROUND INFORMATION	
Have you ever been convicted of a felony or a first degree misdemeanor?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If "Yes", what charges?	
Where convicted?	Date of conviction:
Have you ever pled nolo contendere or pled guilty to a crime which is a felony or a first degree misdemeanor?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If "yes", what charges?	
Where?	Date:
Have you ever had the adjudication of guilt withheld for a crime which is a felony or a first degree misdemeanor?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If "yes", what charges?	
Where?	Date:
Note: a "yes" answer to these questions will not automatically bar you from employment. The nature, job-relatedness, severity and date of the offense in relation to the position for which you are applying are considered. [see §112.011,f.s.]	
RELATIVES	
To your knowledge, do you have any relatives working in this agency?	YES <input type="checkbox"/> NO <input type="checkbox"/>
To your knowledge, are you related to any person on CASA's Board of Directors?	YES <input type="checkbox"/> NO <input type="checkbox"/>

**EDUCATION**

High School			Address:
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:
College			Address:
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:
Other			Address:
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:

**PREVIOUS EMPLOYMENT**

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

**MILITARY**

YES <input type="checkbox"/>	NO <input type="checkbox"/>
Branch	
Rank at Discharge	
Job Title and Responsibilities	

**LICENSURE AND CERTIFICATION**

NUMBER	DATE RECEIVED	EXPIRATION DATE	STATE LICENSING AGENCY

**KNOWLEDGE/SKILLS/ABILITIES (KSAs)**

List KSAs you possess and believe relevant to the position you seek, such as computer skills, fluency in language (s), etc.


**REFERENCES**

*Please list three professional references.*

Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			

**DISCLAIMER AND SIGNATURE**

I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqualify me for employment consideration and, if I am hired, may be grounds for termination at a later date. I understand that any information I give may be investigated as allowed by law. I consent to the release of information about my ability, employment history, and fitness for employment by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, personnel staff, and other authorized employees of CASA for employment purposes. This consent shall continue to be effective during my employment if I am hired. I certify that to the best of my knowledge and belief all of the statements contained herein and on any attachments are true, correct, complete, and made in good faith.

Signature

Date:

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

**In accordance with federal law and U.S. Department of Justice policy, this organization is prohibited from discriminating on the basis of race, color, national origin, religion, sex, age or disability. To file a complaint of discrimination, call the Department of Legal Affairs, Federal Discrimination Complaint Coordinator, PL-01 The Capitol, Tallahassee, Florida, 32399, or call 850-414-3300, or write Office for Civil Rights, Office of Justice Programs, US Department of Justice, 810 7th Street, NW, Washington, DC 20531 or call 202-307-0690 (Voice) or 202-307-2027 (TDD/TYY). Individuals who are hearing impaired or have speech disabilities may also contact OCR through the Federal Relay Service at 800-877-8339 (TTY), 877-877-8982 (Speech), or 800-845-6136 (Spanish).**