

Employment Application

PRINT IN BLACK INK OR TYPE. These instructions must be followed exactly. Fill out application form completely. If questions are not applicable, enter "NA." **Do not leave questions blank.** Be sure to sign when completed. JP & Assoc. is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services. **Resumes will not be accepted in lieu of applications,** unless specifically stated in the job vacancy notice.

DEMOGRAPHICS

NAME _____
(Last) (First) (Middle) (Cell Phone)

MAILING ADDRESS _____
(Street) (City) (State) (Zip) (Country) (Home Phone)

E-MAIL ADDRESS _____

List any other names used if different from name on this application. _____

Full-Time Part-Time Summer Temp/Project Date available for work? _____ Are you at least 17 years of age? Yes No

Are you willing to work hours other than 8-5? Yes No Days are you UNABLE to work? _____

Current Driver's License # (if required for position) _____
(State) (Driver License #)

Have you ever been convicted of a felony or subjected to deferred adjudication on a felony charge? Yes No If your answer is "Yes," explain in concise detail on a separate page, giving dates and nature of the offense, name and location of the court, and disposition of the case(s). A conviction may not disqualify you, but a false statement will. Note: Some state agencies may require additional information related to convictions of misdemeanors.

EDUCATION (NOTE: Applicants may be required to provide proof of diploma, degree, transcripts, licenses, certifications, and registrations.)

High School Graduate or GED? Yes No If yes, name and location of high school or GED institute: _____

College Graduate? Yes No If yes, name and location of institution _____

Special Training/Skills/Qualifications: List all job related training or skills you possess and machines or office equipment you can use, such as calculators, printing or graphics equipment, computer equipment, types of software and hardware. (Attach additional page, if necessary.)

Do you speak a language other than English? (If required for this position) Yes No
If yes, what language(s) do you speak? _____ How fluently? Fair Good Excellent

MILITARY SERVICE (A copy of a report of separation from the Armed Services may be required.)

Are you a veteran? Yes No If yes, list type of discharge _____

Dates of Service (From/To): _____

E m p l o y m e n t A p p l i c a t i o n

EMPLOYMENT HISTORY

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summaries of experience should clearly describe your qualifications.

1. Include LAST 2 employment.
2. Begin with your current or last position and work back.
3. **EMPLOYER ADDRESSES MUST BE COMPLETE MAILING ADDRESSES, INCLUDING ZIP CODE.**
4. Answer all questions and completely summarize your experience including technical and managerial responsibilities and any special training, skills and qualifications for each position you have held.

Position Title: Employer: Mailing Address: City & State/ZIP: Employer's Telephone No.:							Immediate Supervisor Name: Title: Supervisor's Telephone No.:			Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Summer <input type="checkbox"/> Temp/Project <input type="checkbox"/>	
Starting Date			Leaving Date			Current/ Final Salary Mo. Mo.	Starting Date <input type="checkbox"/> Day <input type="checkbox"/> <input type="checkbox"/>		Leaving Date		Average # of hours worked Salary
Mo.	Day	Yr.	Mo.	Day	Yr.		Yr.				
Summary of experience including special training/skills/qualifications you have used in the performance of this job:											
<p>Specific reason for leaving:</p>											
Position Title: Employer: Mailing Address: City & State/ZIP: Employer's Telephone No.:							Immediate Supervisor Name: Title: Supervisor's Telephone No.:			Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Summer <input type="checkbox"/> Temp/Project <input type="checkbox"/>	
Starting Date			Leaving Date			Current/ Final Salary Mo. Mo.	Starting Date <input type="checkbox"/> Day <input type="checkbox"/> <input type="checkbox"/>		Leaving Date		Average # of hours worked Salary
Mo.	Day	Yr.	Mo.	Day	Yr.		Yr.				
Summary of experience including special training/skills/qualifications you have used in the performance of this job:											
<p>Specific reason for leaving:</p>											

E m p l o y m e n t A p p l i c a t i o n

APPLICANT EEO DATA FORM

The information requested is optional and is being collected for the purpose of reporting to Federal and Equal Employment Opportunity Agencies and will not be considered as part of the application for employment.

1. Last Name (Type or Print)		2. First Middle				
3. Address		City	State	ZIP Code	4. Cell Phone	5. Home Phone
6. Sex <input type="checkbox"/> M-Male <input type="checkbox"/> F-Female	7. Birth Date	8. Ethnic Origin <input type="checkbox"/> W-White <input type="checkbox"/> B-Black <input type="checkbox"/> H-Hispanic <input type="checkbox"/> Asian/Pac. Islander <input type="checkbox"/> P-Islander <input type="checkbox"/> Am. Ind/I-Alaskan <input type="checkbox"/> O-Other				
9. Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No		10. Surviving Spouse of Veteran who has not remarried <input type="checkbox"/> Yes <input type="checkbox"/> No		11. Orphan of Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No		12. Former Foster Youth 25 yrs of age or younger <input type="checkbox"/> Yes <input type="checkbox"/> No

13. How did you **first** find out about this job?

- | | | |
|--|---|--|
| <input type="checkbox"/> 01 - Other State Employee | <input type="checkbox"/> 06 - Newspaper _____
<small>Name of Newspaper</small> | <input type="checkbox"/> 11 - WorkInTexas.com |
| <input type="checkbox"/> 02 - Job Fair | <input type="checkbox"/> 07 - College/University Career Day | <input type="checkbox"/> 12 - Other (specify): _____ |
| <input type="checkbox"/> 03 - Professional Publication | <input type="checkbox"/> 08 - Human Resource/Personnel Office | |
| <input type="checkbox"/> 04 - Recruitment Poster | <input type="checkbox"/> 09 - Radio | |
| <input type="checkbox"/> 05 - Television | <input type="checkbox"/> 10 - Agency Web Site - Internet | |

X

Signature – Applicant

Date

White (Not of Hispanic origin) – All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

Black (Not of Hispanic origin) – All persons having origins in any of the Black racial groups of Africa.

Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

Asian or Pacific Islander – All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.

American Indian or Alaskan Native – All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

AN EQUAL OPPORTUNITY EMPLOYER