

Position of Interest: _____

Name of Applicant: _____



Latino Service Providers
1015-A Center Dr. Santa Rosa, CA 95403
(707) 837-9577
www.latinoserviceproviders.org

Application for Employment

Latino Services Provider is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Instructions:

1. Please complete all pages of the application.
2. Please include: Resume, cover letter, and any appropriate/relevant supporting materials.
3. Forward the above including application to Latino Service Providers:

admin@latinoserviceproviders.org

*Application and supporting material will not be returned.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Other name(s) previously used: _____

If you are not a U.S. Citizen, do you have a current work permit? YES NO
☐ ☐

Have you ever been convicted of a felony? YES NO
☐ ☐ If your answer is yes, we will need you to complete a Conviction Statement Form (copy available in our office) in order for your application to be considered. A conviction will not necessarily disqualify you from consideration for employment. (This information will remain confidential pursuant to law.)

If yes, explain: _____

Education

High School Name/GED: _____ Graduation Date: _____

Higher Education/Training Institute: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____
☐ ☐

Position of Interest:

Name of Applicant:

Other: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

References

Please list three professional references:

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

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 ☐ NO ☐

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 ☐ NO ☐

Position of Interest:

Name of Applicant:

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 NO
☐ ☐

Disclaimer and Signature

I certify that all statements on this application are true and complete to the best of my knowledge and belief and, if employed, I understand that any misrepresentation, falsification, or omission of facts may be grounds for disqualification or separation.

By signing the application, I authorize Latino Service Providers to verify the information on this form and any other materials which I have submitted as part of the application process and to contact my references if I become a final candidate for the position.

Signature: _____ Date: _____