



Catawba County United Way

Catawba County United Way

EMPLOYMENT APPLICATION

Applications are considered without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap. Resumes must be attached.

PERSONAL INFORMATION:

Name: _____ *D.O.B.: _____

Street Address: _____ Phone: _____

City/State/Zip: _____ SSN: _____

Desired Salary: \$_____ Date you can start: _____

Driver's License number: _____

Emergency Contact Name/Phone number: _____

Are you a U.S. citizen? (___) Yes (___) No If no, what is your citizenship/residency status: _____

Have you ever been convicted of or charged with a felony or misdemeanor: (___) Yes (___) No If yes, please explain details in full, including dates, details of offense(s) charged, jurisdiction and disposition of case:

EDUCATION:

Schools/Colleges Attended:	# Years	Year Grad	Degree
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_____	_____	_____	_____
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HONORS, ACHIEVEMENTS, EXTRACURRICULAR ACTIVITIES, HOBBIES, OR INTERESTS:



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EMPLOYMENT/WORK EXPERIENCE: Start with your present or most recent position. Include military service assignments and volunteer activities. Exclude organization names that indicate race, color, religion, sex or national origin.

Employer: _____

Job Title: _____ Supervisor: _____

Street Address: _____

City/State/Zip: _____ Phone: _____

Describe Duties/Responsibilities/Accomplishments:

Reason for Leaving: _____

Dates of Employment (Month/Year): From _____ To _____

Employer: _____

Job Title: _____ Supervisor: _____

Street Address: _____

City/State/Zip: _____ Phone: _____

Describe Duties/Responsibilities/Accomplishments:

Reason for Leaving: _____

Dates of Employment (Month/Year): From _____ To _____



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Employer: _____

Job Title: _____ Supervisor: _____

Street Address: _____

City/State/Zip: _____ Phone: _____

Describe Duties/Responsibilities/Accomplishments:

Reason for Leaving: _____

Dates of Employment (Month/Year): From _____ To _____

PROFESSIONAL, UNION, SOCIAL MEMBERSHIPS: _____

MILITARY SERVICE:

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____



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PERSONAL REFERENCES: Please provide names, addresses, phone numbers, relationship and how long known for 3 personal references.

Name: _____ Relationship: _____

Street Address: _____ How long: _____

City/State/Zip: _____ Phone: _____

Name: _____ Relationship: _____

Street Address: _____ How long: _____

City/State/Zip: _____ Phone: _____

Name: _____ Relationship: _____

Street Address: _____ How long: _____

City/State/Zip: _____ Phone: _____

SPECIAL SKILLS: Describe any special skills or qualifications for this work:

I CERTIFY that the above answers are true and complete to the best of my knowledge. I authorize Catawba County United Way, to investigate any statement contained in this application, and to obtain a credit report on me (and my company if this application is for reselling by a company) as necessary to determine my qualifications. I understand that this application is not and is not intended to be any kind of contract or agreement. In the event of employment, I understand that any false or misleading information given in my application, correspondence, discussions, or interview may result in immediate termination. I understand also that I am required to abide by all rules, regulations, and policies of Catawba County United Way.

Signed: _____ Date: _____

*denotes optional information not required for consideration of employment