

Employment Application

Applicant Information

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

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Home Telephone: _____ Work Telephone: _____

Date Available: _____ Social Security No.: _____ E-Mail: _____

Position Applied for: _____ Desired Salary: _____

State the names of relatives and/or friends working for Morton Chamber or EDC:

	YES	NO		YES	NO
Are you available for full-time work?	<input type="checkbox"/>	<input type="checkbox"/>	Are you on a lay-off or subject to recall?	<input type="checkbox"/>	<input type="checkbox"/>
Are you over 18 years of age?	<input type="checkbox"/>	<input type="checkbox"/>	Have you ever worked for this company?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been bonded?	<input type="checkbox"/>	<input type="checkbox"/>	If hired, can you provide documents required to establish your eligibility to work in the U.S.?	<input type="checkbox"/>	<input type="checkbox"/>
Do you speak any foreign languages?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, please list. I-9 Verification Form		
Are you prevented from lawfully becoming employed in this country due to a Visa or immigration status?				<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of, or pled guilty or no contest to, a crime other than a minor traffic violation?				<input type="checkbox"/>	<input type="checkbox"/>

If yes, please explain in detail on a separate piece of paper and include the date of final disposition of the case and the nature of the offense. This information will not necessarily disqualify you from employment but false or misleading information will. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. You are not obligated to disclose sealed or expunged records or convictions or arrests.

Education

(Include additional degrees or course load.)

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

Describe Additional Education:

List professional, trade, business or civic activities and offices held

(You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, handicap or other protected status.)

Previous Employment

(Start with your present or most recent employer. Attach additional sheets if necessary.)

Company: _____ Telephone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: _____ Ending Salary: _____

List the duties performed and skills used or learned while you worked in this position.

From: _____ To: _____ Reason for Leaving: _____

During the employment, how many scheduled work days were you absent, tardy, or did you leave early annually?

Are you eligible for rehire? YES NO May we contact your previous supervisor for a reference? YES NO

Company: _____ Telephone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: _____ Ending Salary: _____

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 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: _____ Ending Salary: _____

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Are you eligible for rehire? YES NO May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____
 Rank at Discharge: _____ Type of Discharge: _____
 If other than honorable, explain: _____

reputation, personal characteristics, and mode of living conducted by a third-party consumer reporting agency. Upon my written request, Morton Economic Development Council will provide me additional information concerning the nature and scope of the report as required by the Fair Credit Reporting Act.

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I attest that all the information provided in this Application for Employment is true, correct, and complete. I understand that the misrepresentation or omission of any material fact herein is grounds for disqualification of the applicant or for immediate dismissal if hired, without any previous notice.

I authorize Morton Economic Development Council and Chamber of Commerce to conduct a thorough background investigation of my work and personal history, and verify all information given on this application and during interviews. I hereby release Morton Economic Development Council and Chamber of Commerce, and its representatives or agents, from any liability that might result from such an investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information.

I understand that this Application for Employment will be maintained as an active file with the Morton Economic Development Council and Chamber of Commerce for six months from the date of execution below. I understand that if I wish to be considered for employment after that time I must submit a new Application for Employment.

Nothing in this application is intended to create or imply a contractual relationship, I understand that acceptance of an offer of employment creates no obligation upon Morton Economic Development Council or Chamber of Commerce to continue to employ me in the future and that my employment with the Company is strictly at-will. I understand that all candidates hired are subject to satisfactory completion of an introductory period and a post-offer, pre-employment drug screen.

Date

Signature



Equal Employment Opportunity Form

Equal Employment Opportunity Statement

The Morton Economic Development Council and Chamber of Commerce is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, marital status, sex, sexual orientation, national origin, citizenship, age, disability or veteran status. We assure you that your opportunity for employment with this Company depends solely on your qualifications. Information provided on this application will not be used for discriminatory purposes.

Applicant Information

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

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Home Phone: _____ () _____ Social Security Number: _____

Position Applied for: _____

Voluntary Information

This information is being requested in accordance with federal regulations. The information is voluntary and will not be used when considering you for employment with our company.

Racial or Ethnic Group

- American Indian/Alaskan Asian/Pacific Islander Black/African American
 Hispanic/Latino White/Caucasian Other

Gender

- Female Male

Military Service

- Pre-Vietnam Era Vietnam Era
 Post-Vietnam Era Disabled Veteran

How did you hear about this position?

- Newspaper Company Employee Professional Publication
 Job Fair Placement Office Web Site
 Other

FOR EMPLOYER'S USE ONLY

Reference Verifications

Name:

Company:

Telephone No.:

Date of Contact:

Comments:

Name:

Company:

Telephone No.:

Date of Contact:

Comments:

Name:

Company:

Telephone No.:

Date of Contact:

Comments:

Name:

Company:

Telephone No.:

Date of Contact:

Comments: