Lewis County Opportunities, Inc. **Application For Employment**



PLEASE PRINT

An Equal Opportunity Employer

PLEASE PRINT						
Last Name	First Name	Middle Initial			Other Former Names	
Address		City			State	Zip Code
Telephone Number((s)			Date	of Applica	tion
Home ()	Work ()				
Position(s) for which	n you are applying:					
How did you learn a	bout us?					
			_			
Are you at least 18 y	years of age?		□ Yes	□ No		
Have you ever filed	an application with us b	efore?	□ Yes	□ No	If yes, whe	en?
•	n employee presently w Opportunities Board Me	•	□ Yes	□ No	If yes, who Relationsh	m? ip:
Are you eligible to la States?	awfully be employed in the	he United	□ Yes	□ No	of citizensl	employment, proof nip or immigration be required before
On what date would	you be available to wor	k?				
What type of employ	yment are you interested	d in?	□ Full Tim	ne Pa	□ rt Time	
Have you ever been	convicted of a criminal	offense?	□ Yes	□ No		onviction will not isqualify an applicant.)
If yes, please explai	n:					
	orm the essential functions the essential functions applying, with or without oncorrection?		□ Yes	□ No		

DRIVERS LICENSE INFORMATION

Do you have a valid driver's lic	□ Yes	□ No					
License type/class	License I.D. #		140	State	On		
Has your driver's license ever	Date Issued been	П	П	Expires	On		
suspended or revoked?		Yes	No	If yes, please ex	plain:		
Do you presently have a clean driving record?			□ No				
EDUCATIONAL BACKGI	ROUND						
School Name/ Address	Major/Minor		ears pleted	Did You Graduate?	Degree/Diploma		
PROFESSIONAL REFER List the names, addresses, and telep who have known you for more than a	phone numbers of the			professions or bus	iness (not relatives)		
Name/Address	Telephon	e Numb	per	Occupation	Years Known		
SPECIAL SKILLS AND QUALIFICATIONS Describe any special training, skills, licenses, certifications and/or job-related characteristics about yourself that may qualify you to perform the essential functions of the position for which you are applying:							

EMPLOYMENT HISTORY

Please list your last three (3) employers, assignments or volunteer activities, starting with your most recent.

Employer	Dates Employed				
	From:	To:			
Address					
Telephone Number	What were your job responsib	pilities?			
() -					
May we contact this Employer?					
☐Yes ☐ No					
Job Title					
Immediate Supervisor/Title	Reason for leaving				
Employer	Dota	on Employed			
Employer	From:	es Employed To:			
Address	110111.	10.			
Telephone Number	What were your job responsib	ilitios?			
() -	What were your job responsit	omities :			
May we contact this Employer?					
Yes No					
Job Title					
Immediate Supervisor/Title	Reason for leaving				
F	_				
Employer		es Employed			
Address	From:	То:			
Address					
Telephone Number	What were your job responsibilities?				
(') -	, , , ,				
May we contact this Employer?					
Job Title					
Immediate Supervisor/Title	Reason for leaving				
'	Ĭ				
Comments: (Include explanation of a	any gans in employment)				
	any gapo in omploymont				

NON-DESCRIMINATION STATEMENT

Opportunities does not discriminate because of age, race, creed/religion, color, national origin, sex/gender, pregnancy or pregnancy-related conditions, sexual orientation, gender identity/expression, disability, marital status, familial status, domestic violence victim status, prior arrest or conviction record, military/veteran status, predisposing genetic characteristics, or any other basis prohibited by Federal and State law, as well as union or political affiliation, in regard to employment, upgrading, demotion, re-assignment, transfer, recruitment, advertising, lay off, termination, rates of pay, or other compensation, selection for training or any other benefit or condition of employment.

APPLICANT STATEMENT

I understand that employment with Lewis County Opportunities is *at-will*; meaning that I or Lewis County Opportunities may terminate my employment at any time, or for any reason consistent with applicable state and federal law.

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that false or misleading information given in my application or interviews(s) may result in my termination if hired.

I authorize Lewis County Opportunities to contact the professional references I provided in this application, and I understand that contacting employment references will only be done through a separate authorization.

I understand this application will be active for a minimum of 90 days; however after that time, if I wish to be considered for future employment opportunities, I must submit a new application.

I understand that if offered employment, such offer would be conditional upon the agency conducting a background examination; including a background check and driving history review. I acknowledge the agency reserves the right to rescind an offer of employment or terminate employment should the results of my background examination not be acceptable.

Signature of Applicant		
3 11		
Date		