



Gordon Jewish Community Center
APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer - All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name:		Date:	
Address:			
	<i>Street address (NO P.O Box)</i>	<i>City, State/Zip</i>	
E-mail Address:			
Home Phone #:		Mobile Phone #:	

Are you eligible to work in the U.S? Yes No

Are you at least 18 years or older? Yes No
(If no, you may be required to provide authorization to work.)

Have you ever been convicted of a felony, convicted of a misdemeanor, or convicted in a military court martial? Yes No Explain: _____

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

Have you ever been terminated from employment or asked to resign by an employer? Yes No
If yes, please provide company names and details below:

EMPLOYMENT DESIRED

Please list shifts you are available to work? Check here if you can work any time.

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Time (am/pm)							

Can you work overtime, including holidays if needed? Yes No

EMERGENCY CONTACT

PHONE:

Position applying for:		Hourly rate/Salary desired:		Date you can start:	
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REFERRAL SOURCE

How did you hear about us? Walk-In Job board _____ Referral _____
 Other _____

Have you ever worked for this company before? Yes No Explain: _____

EDUCATION	Name and location of school	No. of yrs. Attended	Degree Received	Subjects studied/Major
High School				
College or University				
Trade, Business or Correspondence School				
Graduate School				

EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			

From	To	Employer Name	Telephone
Job Title	Address		
Immediate supervisor and title	Summarize the nature of work performed and job responsibilities		
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Reason for leaving			
From	To	Employer Name	Telephone
Job Title	Address		
Immediate supervisor and title	Summarize the nature of work performed and job responsibilities		
Reason for leaving			

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain. List any certifications needed for the job in which you are applying (ex. Red Cross, CPR, etc):

PROFESSIONAL REFERENCES Give the names of three persons not related to you, whom you have known at least three (3) years. Two must be prior managers or someone who could verify your work performance.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Please read carefully before signing.

The Gordon Jewish Community Center is an equal opportunity employer. The Gordon Jewish Community Center does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for The Gordon Jewish Community Center to hire me. If I am hired, I understand that either The Gordon Jewish Community Center or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of The Gordon Jewish Community Center has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to the Gordon Jewish Community Center true and complete information on this application. No requested information has been concealed. I authorize The Gordon Jewish Community Center to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date: _____ Signature: _____

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE SIGNED/DATED ABOVE.

