309 E 7th St PO Box 503

York NE 68467

402-362-3353

**APPLICATION FOR EMPLOYMENT**

Position Applying for: Date of Application:

How Did You Learn About Us? Please check all that apply:

* Indeed  Social Media
* Employment Agency  Walk-In
* Relative  Friend
* Current Epworth Employee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name First Name Middle Initial

Address City State Zip

Telephone Number Email

Have you ever filed an application with us before?  Yes  No If Yes, give date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been employed with us before?  Yes  No If Yes, give date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you currently employed?  Yes  No

May we contact your present employer?  Yes  No

Are you lawfully authorized to work in the United States?  Yes  No

**Nebraska Resident**:  Yes  No If yes, date of Nebraska Residency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a valid Nebraska driver’s license?  Yes  No If No-State Issued: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What other states have you lived in? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On what date would you be available to work? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you available to work:  Full Time  Part Time  Relief  Summer

Can you travel if a job requires it?  Yes  No

**PROFESSIONAL REFERENCES**

**Name** **Occupation** **Telephone Number Years Known**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**EDUCATION RECORD**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Name & Address of School** | **Course of Study** | **Years Completed** | **Diploma/Degree** |
| **High**  **School** |  |  |  |  |
|  |  |  |  |  |
| **Undergraduate College** |  |  |  |  |
| **Graduate Professional** |  |  |  |  |

**EMPLOYMENT EXPERIENCE**

Start with your present or last job. Include any job-related assignments and/or volunteer activities.

|  |  |  |  |
| --- | --- | --- | --- |
| Employer | Start Date | End Date | Duties Performed |
|  |  |  |
| Address |  | |
| Telephone Number | Hourly Rate/Salary  $ | |
| Job Title  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Supervisor  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Reason for Leaving  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  May Epworth contact this employer?  Yes  No | | |
| Employer | Start Date | End Date | Duties Performed |
| Address |  | |
| Telephone Number | Hourly Rate/Salary  $ | |
| Job Title  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Supervisor  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Reason for Leaving  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  May Epworth contact this employer?  Yes  No | | |

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| --- | --- | --- | --- |
| Employer | Start Date | End Date | Duties Performed |
| Address |  | |
| Telephone Number | Hourly Rate/Salary  $ | |
| Job Title  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Supervisor  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Reason for Leaving  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  May Epworth contact this employer?  Yes  No | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employer | Start Date | End Date | Duties Performed |
| Address |  | |
| Telephone Number | Hourly Rate/Salary  $ | |
| Job Title  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Supervisor  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Reason for Leaving  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  May Epworth contact this employer?  Yes  No | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employer | Start Date | End Date | Duties Performed |
| Address |  | |
| Telephone Number | Hourly Rate/Salary  $ | |
| Job Title  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Supervisor  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Reason for Leaving  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  May Epworth contact this employer?  Yes  No | | |

*Please continue on a separate sheet of paper for additional employers.*

**Describe any specialized qualities, training, internship, skills, volunteering and/or extra-curricular activities applicable to the position you are applying for:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Other Qualifications**

Summarize special job-related skills and qualifications acquired from past employment or other experience.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State any additional information you feel may be helpful to us in considering your application.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of not to exceed six months.

**I UNDERSTAND AND ACKNOWLEDGE THAT, IF HIRED, MY EMPLOYMENT RELATIONSHIP WITH EPWORTH FAMILY RESOURCES WOULD BE OF AN “AT WILL” NATURE, WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND EPWORTH FAMILY RESOURCES MAY DISCHARGE EMPLOYEE AT ANY TIME FOR ANY OR NO REASON.**

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the employer.

I understand that Epworth Family Resources will only consider applicants that pass the following background checks:

* Adult and Child Abuse Registry
* OneSource Criminal Background
* DMV Check
* Nebraska State Patrol Criminal Check
* Sex Offender Registry Check
* Pre-employment Drug Screen

\_\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant Date

**EQUAL EMPLOYMENT OPPORTUNITY**

Epworth Family Resources does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, sex, ancestry, veteran status, marital status, sexual orientation, or disability or on the basis of age against persons who are forty years of age or older. No questions on this application is intended to secure information to be used for such discrimination.

All applicants accepted for employment are placed on a temporary basis subject to an introductory period, and if in our judgement it is found at any time during or after this introductory period the employee is not suitable for work at Epworth Family Resources employment may be terminated without other reason.

# **APPLICANT’S STATEMENT OF RELEASE**

**I hereby authorize each former employer to release information and answer any questions asked by Epworth Family Resources regarding my previous employment. I also hold such persons harmless for giving any information within their knowledge or records.**

**Name of Applicant: (print)**

**Signature of Applicant Date**