

Application for Employment

| Date: | |
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Please answer all questions. Resumes are not a substitute for a completed application.

We are an equal opportunity employer. Applicants are considered for positions without regard to race, religion, sex, national origin, age, disability, or any other category protected by applicable federal, state or local laws.

THIS ORGANIZATION IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF

| Position Applied Fo | r· | Name | | | |
|---|---|------------------------------|--|--------------------|-------------------|
| Position Applied For: Telephone Number: | | | | umber: | |
| | • | Alternati | . relephone iv | umber: | |
| | Street, Apartment, or Unit Nun | mber | City | State | Zip Code |
| How long have you | lived here:/ | | , | | , |
| - , | Years Months | | | | |
| | urly Rate: per | | | | |
| If under the age of | 18, can you produce the necessary work o | certificate at the t | ime of employ | ment? Yes | No 🗌 |
| Type of employmer | nt desired? Full-time Part-time | (Specify Hours | Available |) | |
| Are you willing to w | vork overtime? Yes No No | Date on | which you can | start work if hire | d: |
| • | bout this position? | | | | |
| Do you know anyor | ne affiliated with the Community House? | Yes 🗌 No 🗌 | | | |
| If yes, please provid | de the person(s) name: | | | | |
| ii yes, pieuse provie | the person(s) name. | | | | |
| | uages which you speak other than English | | | | |
| Please list any lango Have you ever initia If yes, please provic | | 1: Yes | | | " answer will not |
| Please list any lango Have you ever initia If yes, please provic necessarily disquali | uages which you speak other than English ated an act of violence in the workplace? de the date(s) and explain so that the indi | Yes No No ividual circumstan | ces can be cor | nsidered. (A "yes | |
| Please list any lango Have you ever initia If yes, please provic necessarily disquali | uages which you speak other than English ated an act of violence in the workplace? de the date(s) and explain so that the indiffy you from employment.) | Yes No No ividual circumstan | ces can be cor | nsidered. (A "yes | mputer |
| Please list any lango Have you ever initia If yes, please provic necessarily disquali List all special techr programming/lango | uages which you speak other than English ated an act of violence in the workplace? de the date(s) and explain so that the indiffy you from employment.) | Yes No No ividual circumstan | ces can be cor u are applying nines, etc.) | (for example, con | |
| Please list any lange Have you ever initia If yes, please provic necessarily disquali List all special techr programming/lange | uages which you speak other than English ated an act of violence in the workplace? de the date(s) and explain so that the indify you from employment.) nical skills that you feel qualify you for the uage, software, equipment operation, spe | Yes No No ividual circumstan | ces can be cor u are applying nines, etc.) | (for example, cou | mputer |
| Please list any lange Have you ever initia If yes, please provic necessarily disquali List all special techr programming/lange Education | uages which you speak other than English ated an act of violence in the workplace? de the date(s) and explain so that the indify you from employment.) nical skills that you feel qualify you for the uage, software, equipment operation, spe | Yes No No ividual circumstan | ces can be cor u are applying nines, etc.) | (for example, cou | mputer |
| Please list any lange Have you ever initia If yes, please provic necessarily disquali List all special techr programming/lange Education High School | uages which you speak other than English ated an act of violence in the workplace? de the date(s) and explain so that the indify you from employment.) nical skills that you feel qualify you for the uage, software, equipment operation, spe | Yes No No ividual circumstan | ces can be cor u are applying nines, etc.) | (for example, cou | mputer |



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If applicable, list below any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of an assumed name, nickname, etc.

WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with the present or last employer listed first. Account for <u>all</u> periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment.

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|--|---|--|---|--|---|--|
| Name | | Street Address | City | State | Type of Business | |
| Telephone: | | _ Dates Emplo | yed: From | To | | |
| ob Title: | | Duties: | | | | |
| Supervisor's Name: | | May we cont | May we contact? Yes | | No If no, why not? | |
| Nages: Start Finish | | Reason for le | Reason for leaving: | | | |
| What will this employe | r say was the reason yo | our employment terminate | ed? | | | |
| low much notice did y | ou give when resigning | ? If none, explain why | | | | |
| Employer: | | | | | | |
| Name | | Street Address | City | State | Type of Business | |
| elephone: | | _ Dates Emplo | yed: From | To | | |
| | | | | | | |
| Supervisor's Name: | | May we cont | act? Yes 🗌 | No 🗌 If no, wh | ıy not? | |
| Nages: Start | Finish | Reason for le | aving. | | | |
| | | our employment terminate | | | | |
| what will this employe | i say was the reason yo | our employment terminate | :u: | | | |
| <u> </u> | ou give when resigning | ? If none, explain why | | | | |
| Please explain fully all gase explain fully all gase some seen tental seen tental seen given been been been been been been been b | ou give when resigning gaps in your employme minated or asked to reever been terminated been the choice to resign | | month No ☐ s | If yes, how man If yes, how man | ny times? ny times? ny times? | |
| Please explain fully all galled and sever been tended as your employment of the sever been given by the sever been given answered "yes" to the sever been given by the sever by the sev | gaps in your employme minated or asked to reever been terminated been the choice to resign o any of the above the | nt history in excess of one esign from any job? Yes you mutual agreement? Yes rather than be terminate | month No No No No No No No No No No | If yes, how man If yes, how man If yes, how ma ances of <u>each</u> occ | ny times? ny times? ny times? asion. | |
| Please explain fully all and the second seco | gaps in your employme minated or asked to reever been terminated been the choice to resign o any of the above the | rt history in excess of one esign from any job? Yes or mutual agreement? Yes rather than be terminate re questions, please expla | month No s No d? Yes No in the circumst | If yes, how man If yes, how man If yes, how ma ances of <u>each</u> occ | ny times? ny times? ny times? asion. | |
| Please explain fully all galaxe you ever been tended as your employment of the second answered "yes" to the second answered "yes" to the second answered ans | gaps in your employme reminated or asked to receiver been terminated been the choice to resign to any of the above the 2 work-related references. | rt history in excess of one esign from any job? Yes or mutual agreement? Yes rather than be terminate re questions, please explances we may contact. Individual in the contact of the cont | month No s No d? Yes No in the circumst | If yes, how man If yes, how man If yes, how man tances of each occ prior work experi | ny times? ny times? ny times? asion. | |





Please list the names of a personal reference (not previous employers or relatives) who knows you well that we may contact.

| NAME | OCCUPATION | ADDRESS | TELEPHONE | # OF YEARS KNOWN |
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| | | | | |

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the Company may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local law.

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign confidentiality, restricted covenant, and /or conflict of interest statement, as well as an agreement to arbitrate.

I certify that all the information on this application, my resume, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment, or if employed, disciplinary action up to and including immediate dismissal.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYEMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE COMPANY IS AUTHORIZED TO ENTER INTO AN AGREEMENT – EXPRESS OR IMPLIED – WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY.

IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize the Company or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking and to the extent permitted by federal, state, and local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the abovementioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law,



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any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I herby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by this company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this Company employs only individuals who are legally eligible to work in the United States.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR

| EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY. | W 61 33X11 (60) BX13. II 100 WISH 10 BE 661131BEREB 1011 |
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| I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDE | D ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE. |
| Applicant Signature: | |
| If the applicant is a minor, the foregoing release and consent mus Signature by the applicant's parent or legal guardian constitutes a guardian that the Company, to the extent permitted by federal, st controlled substances, conduct inspections of property without nwho need to know, the applicant, and the applicant's legal guardi | acknowledgement by the applicant and the parent or legal tate, and local law, can test the applicant for illegal or otice and communicate test results to Company personnel |
| Parent / Legal Guardian | Witness |
| Date | Date |

UNDER MASSACHUSETTS LAW, IT IS UNLAWFUL FOR AN EMPLOYER TO REQUIRE OR TO ADMINISTER A LIE DETECTOR, POLYGRAPH, OR SIMILAR TEST AS A CONDITION OF EMPLOUMENT OR CONTINUED EMPLOYMENT.

FEDERAL LAW MAY PROHIBIT THE USE OF A LIE DETECTOR, POLYGRAPH, OR SIMILAR TEST AS WELL.