



The Arc of Franklin & Fulton Counties Employment Application

Applications are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or in the presence of a non-related medical condition and/or handicap.

Name: _____ Date Completed: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Are you 18 years of age or older? Yes No Are you a citizen of the United States of America? Yes No

Are you a veteran of the U.S. Military? Yes No; if so, which branch: _____ Date of Service: _____

Applying for: Full Time Part Time Temporary/Seasonal Available Start Date: _____

Have you ever applied here before? Yes No; if so when: _____

Do you know anyone employed by The Arc? Yes No, if so whom and how: _____

Were you referred to our agency? Yes No, of so whom: _____

Employment Experience

Please begin with your most recent employment and be sure to include any military assignments and/or volunteering

Employer Name: _____

Address: _____

Supervisor: _____ Phone Number: _____

Position Held: _____ Employment Dates: _____ to _____

Reason for leaving: _____ Are you eligible for rehire? Yes NO

May we contact: Yes NO, if not, why: _____

Employer Name: _____

Address: _____

Supervisor: _____ Phone Number: _____

Position Held: _____ Employment Dates: _____ to _____

Reason for leaving: _____ Are you eligible for rehire? Yes NO

May we contact: Yes No, if not, why: _____

Employer Name: _____

Address: _____

Supervisor: _____ Phone Number: _____

Position Held: _____ Employment Dates: _____ to _____

Reason for leaving: _____ Are you eligible for rehire? Yes NO

May we contact: Yes No, if not, why: _____

Employer Name: _____

Address: _____

Supervisor: _____ Phone Number: _____

Position Held: _____ Employment Dates: _____ to _____

Reason for leaving: _____ Are you eligible for rehire? Yes NO

May we contact: Yes No, if not, why: _____

Application continued on back

Education

High School: _____
Diploma/GED: Yes No

Attended: _____

High School: _____
Diploma/GED: Yes No

Attended: _____

College: _____
Major: _____ Degree: still attending Associates Bachelor Master Doctorate

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College: _____
Major: _____ Degree: still attending Associates Bachelor Master Doctorate

Attended: _____

Skills / Qualifications

Please describe any special qualifications, certifications, and or previous experiences including volunteering that would further demonstrate your ability to be successful in the position for which you are applying.

References

Name: _____ Phone Number: _____
Length Known: _____ How Known: _____

Name: _____ Phone Number: _____
Length Known: _____ How Known: _____

Name: _____ Phone Number: _____
Length Known: _____ How Known: _____

Acknowledgement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigations of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not intended to be a contract of employment. In the event of employment, I understand that false or misleading information on my application or interview may result in termination.

Applicant's Signature: _____ Date: _____

Personnel Department Use Only

Judicial Checks:
 Adams County _____
 Cumberland County _____
 Franklin County _____
 Fulton County _____

