



This employer will not discriminate against any individual or group because of race, sex, sexual orientation, religion, age, national origin, color, marital status, political beliefs or disability. Applicants with a disability who may need an accommodation to participate in the interview process should make such a request when contacted to schedule an interview. This application form is available in alternate accessible formats upon request.

Employment Application

You must complete this form to apply for employment. Answers must be complete and legible.

Today's Date:

Applicant Information				
Applicant's Name (Last First, M.I.)			Area Code/Telephone No.	
Street Address			Alternate phone No.	
City			State	
Zip Code			County	
E-mail Address			Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you a citizen of the United States or an alien authorized to work in the United States on a full or part-time basis? <input type="checkbox"/> yes <input type="checkbox"/> No If No, please explain:				
Position(s) Applying For			How did you learn of the vacancy?	
Date You Can Start		Wage Desired	Have you ever applied with this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
			Where?	
			When?	
Are any of your employment records under a different name? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, please provide names:				
Do you have the use of a motor vehicle? (If required in the performance of job duties) <input type="checkbox"/> Yes <input type="checkbox"/> No				
Do you have any supplemental employment that will be a potential conflict of interest for the position you are applying for? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If Yes, please explain:				
Are you related to anyone who currently works for this company? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If Yes, please indicate names of relatives and where they work:				

Education and Training

Check all Applicable boxes. Attach photocopy of college transcript. (When required.)		College & Major	Certificate or Degree Earned
<input type="checkbox"/>	High School Graduate/GED		
<input type="checkbox"/>	Associates Degree		
<input type="checkbox"/>	Bachelor's Degree		
<input type="checkbox"/>	Master's Degree		
<input type="checkbox"/>	Other		

Occupational Licenses, Registration, Certificates

License/Certificates Issued By	Field/Trade/Specialization	License/Certification No.	Issue Date	Expiration Date

Employment History

Please list below all work-related experience, including military service, starting with the most recent employment and working backwards. Provide a detailed description of regularly assigned ongoing duties for each job. Additional sheets may be attached if necessary.

Are you currently employed? Yes No If so, may we contact your present employer(s)? Yes No

Do we have permission to contact your previous employer(s)? Yes No

Classification	Job Title	Dates of Employment (Month & Year)		
		From:	To:	
Employer		Supervisor Name and Title		
Business Address		Current/Ending Salary	Telephone No.	
Description of job duties		Reason for leaving		

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Special Skills: List training, licenses, office machines you can operate, typing speed, languages you speak fluently, etc. and any other skills which add to your qualifications.

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Do you have computer skills? Please list software programs you have used:

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Date available for employment:

References: List three professional references (not related to you)

I give permission for the references listed below to be contacted by Region 7b: Yes No

Name and Address (Number, Street, City, State and Zip Code)	Telephone Number	Occupation

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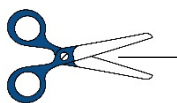
Applicant Certification

I certify that all information above is true and complete and I agree and understand that any falsification of material facts will result in forfeiting any rights to consideration for employment with the above listed company or possible dismissal, if discovered after I have been hired. I also understand that I may need to submit information and authorize Region 7b Employment and Training Consortium to complete a background check upon job offer and that the offer may be removed if I fail to comply or pass.

Applicant Signature	Date
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**** Application Submission Instructions ****

Completed application must be returned to: employment@michworks4u.org
 You must include a letter of interest with salary requirements and resume.
 Applications must be received prior to the close of the position. Region 7B reserves the right to reject any application.



Employer, remove this section prior to the selection process and forward to EO Officer

EEO Survey

Although the following information is not mandatory, it is requested to comply with PI 13-23 requirements. It will in no way affect your employment status or opportunities, nor will it be used as part of the selection process (hiring managers will not receive this information).

Position: _____

County: _____

Date: _____

Gender: Female Male

Race/ Ethnicity (Please select all that apply to you):

- American Indian or Alaska Native:** A person having origins in any of the original peoples of North and South America (including Central America)
- Asian:** A person having origins in any of the original people of the Far East, Southeast Asia, or the Indian Subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black (not of Hispanic origin):** A person having origins of any of the black racial groups
- Hispanic or Latino:** A person of Mexican, Puerto Rico, Cuban, or South American, or other Spanish origin.
- Native Hawaiian or Other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White (not of Hispanic origin):** A person having origins in any of the original peoples of Europe, North Africa, or Middle East)
- Multiracial:** A person having origins in more than one racial group.