

Application for Employment

Name:	Date:			
Address:				
Phone 1:	Phone 2:			
Position Desired:				
Can you perform the essential functions of the YES () NO () If no, please explain. (If you have any of applying, please ask the interviewer this question.)	position for which you are applying? questions as to what functions are applicable to the position for which you are			
When would you be available to begin work?				
Are you legally eligible to be employed in the U (Proof of identity and eligibility will be requires upon employment				
Have you ever worked for TRC before? YES () N If yes, where?	• •			
When? (Give Dates)	 Job Title			
Do you have any relatives or friends who work fill yes, who and where do they work?				
Have you ever done any volunteer work? YES ((Omit any volunteer work which reflects your race, color, religion				
Are you available to do work: Days () Nights ()	Weekends () Full time () Part time ()			
Are you presently employed? YES () NO () If ye YES () NO () If presently employed, why are you				

which you are applying? YES () NO () If yes, please explain and list offices held: (Omit any organizations which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities.) **EDUCATION:** High School: _____Address: _____ From: ______ To: _____ Did you graduate: YES () NO () Degree: _____ College: _____ Address: ____ From: ____ To: ____ Did you graduate YES () No () Degree: _____ Other: _____ Address: ____ From: ____ To: ____ Did you graduate YES () NO () Degree: _____ Have you completed any special courses, seminars and/or training that would enable you to perform the position for which you are applying? YES () NO () If yes, please describe: ______ **EMPLOYMENT: Start with you present or most recent position:** Name of Employer: _____ Phone: _____ Address:_____ Job Title: _____ Starting Salary: \$____ Ending: \$____ From: _____ To: ____ Reason for Leaving: _____ Name of Employer:______Phone:_____ Address: _____ Starting Salary: \$_____Ending: \$_____ Job Title: Responsibilities: From: ______ To: _____ Reason for Leaving: ______ Name of Employer: _____ Phone: _____ Address:_____ Job Title: _____ Starting Salary: \$_____Ending: \$_____ Responsibilities:____ From: _____ To:____ Reason for Leaving: _____ Name of Employer:______Phone: _____ Address:____ Starting Salary: \$_____Ending: \$_____ Job Title:__ Responsibilities: From: ______ To: _____ Reason for Leaving: _____

Do you belong to any professional, trade, business or civic organizations that deal with the position for

MILITARY SERVICE: _____ From: _____ To: ____ Branch: From: To: To: Type of Discharge: Branch: If other than honorable, explain: **IMPORTANT, PLEASE READ AND SIGN:** APPLICANTS WILL RECEIVE CONSIDERATION FOR POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, AGE, SEX (EXCEPT WHERE SEX IS A BONIFIDE OCCUPATIONAL QUALIFICATION), SEXUAL ORIENTATION, MARITAL STATUS, INDIVIDUALS WITH DISABILITIES, AND EQUALLY TO DISABLED VETERANS AND VETERANS OF THE VIETNAM ERA. I understand that failure to reveal any prior employer, or giving false or misleading information by me on any part of this application for employment can be grounds for termination from the company. I understand that if I am hired, my employment is for no definite time and may be terminated at any time without prior notice. Signed: **RESULTS:** Employed: YES () NO () _____Department:_____ If yes, Job Title: _____ Hire Date: ______Compensation: \$ ______

Interviewed by: _____ Date: _____

REFERENCES:

Ι.		
	(Name)	(Phone Number)
	(Address)	
2.		
	(Name)	(Phone Number)
	(Address)	
3.		
	(Name)	(Phone Number)
	(Address)	

APPLICANTS STATEMENT:

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. I hereby allow a criminal background check to be done to ascertain my past and present criminal justice status.

I hereby understand and acknowledge that, unless otherwise defined and applicable by law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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

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Signature of Applicant	Date	

Voluntary Affirmative Action Information

(Completion of information below is voluntary)

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

Dated:/				
Position(s) Applied For:				
Referral Source:				
() Advertisement () Employee	() Relative () Walk-in (() School		
() Other				
Applicant's Name:				
Last	First		Middle	
Address				
Street	(City	State	Zip Code
Phone Number: () Area Code Ph	none			
As required, we comply with gove they apply.	rnment regulations includ	ding Affirn	native Action obligat	ions where
In an effort to comply with require legal obligations, we ask that you				
Please be advised that your survey considered confidential information			• •	nt. It is
CHECK ONE: () Male () Female				
CHECK ONE OF THE FOLLOWING R	ACE/ETHNIC GROUPS:			
() Hispanic () Black () White ()	American Indian/Alaskan	Native () Asian Pacific/Pacifi	c Islander
CHECK ANY OF THE FOLLOWING T	HAT ARE APPLICABLE:			
() Vietnam Era Veteran () Disable	ed Veteran () Handicapp	ed Individ	ual	