



Application for Employment

Date: _____

Name: (Last, First, Middle): _____

Mailing Address: _____

Work Phone: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Do you have the legal right to work in the United States? _____

(Final confirmation of employment with ARDC is contingent upon timely completion of an Employment Eligibility Verification Form I-9)

Are you at least 18 years of age? _____

Do you have any relatives employed by ARDC? If yes, indicate whom. _____

Have you ever been previously employed by ARDC? _____ If yes, please note date of hire and your former position title: _____

Type of Employment you are seeking (note Full-time, Part-time, or Temporary): _____

Available Start Date: _____

Education Background (Please indicate the highest level of education you have completed): _____

Schooling:

- 1) Name of school and location (city/state): _____
Number of months attended: _____ Number of credits earned: _____
Type of credits (sem/qtr): _____ Degree Type: _____
Major: _____ Minor/Emphasis: _____

- 2) Name of school and location (city/state): _____
Number of months attended: _____ Number of credits earned: _____
Type of credits (sem/qtr): _____ Degree Type: _____
Major: _____ Minor/Emphasis: _____



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3) Name of school and location (city/state): _____
Number of months attended: _____ Number of credits earned: _____
Type of credits (sem/qtr): _____ Degree Type: _____
Major: _____ Minor/Emphasis: _____

Work Experience: (Starting with your present or most recent employer, list all work experience relevant to the positions for which you are applying.)

Present or last employer: _____
Mailing Address: _____
Your supervisor's name: _____ **Phone number:** _____
Dates employed (month/year) from: _____ **to:** _____
Total number of months employed: _____
Job title: _____
Reason for leaving: _____

Job duties/accomplishments:

Second last employer: _____
Mailing Address: _____
Your supervisor's name: _____ **Phone number:** _____
Dates employed (month/year) from: _____ **to:** _____
Total number of months employed: _____
Job title: _____
Reason for leaving: _____

Job duties/accomplishments:



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Third last employer: _____
Mailing Address: _____
Your supervisor's name: _____ Phone number: _____
Dates employed (month/year) from: _____ to: _____
Total number of months employed: _____
Job title: _____
Reason for leaving: _____

Job duties/accomplishments:

References: (List three work/educational related references that are in a position to evaluate your experience and qualifications.)

1) Name: _____ Title: _____
Address: _____
Home phone: _____ Work phone: _____
Email address: _____

2) Name: _____ Title: _____
Address: _____
Home phone: _____ Work phone: _____
Email address: _____

3) Name: _____ Title: _____
Address: _____
Home phone: _____ Work phone: _____
Email address: _____

Registrations, licenses or certifications (list any relevant items here):

1) _____
2) _____
3) _____



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Additional Information. (To assist us in evaluating your application, please use this space to provide additional information necessary to describe your full qualifications.)

Applicant Signature: _____ **Date:** _____

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the Human Resources Manager. As an Equal Opportunity Employer, we consider all applicants for positions.