

Employment History/Work Experience (Start with the most recent position held; include up to 10 years of experience. Attach additional pages if needed.)

(1) Employer _____ Title _____

Address _____

Dates Employed: _____ to _____ Full Time _____ Part Time _____ Hrs/Wk _____

Job Responsibilities:

Supervisor's Name _____

Supervisor's Phone _____ Email Address _____

May we contact your supervisor?

Reason for Leaving _____

(2) Employer _____ Title _____

Address _____

Dates Employed: _____ to _____ Full Time _____ Part Time _____ Hrs/Wk _____

Job Responsibilities:

Supervisor's Name _____

Supervisor's Phone _____ Email Address _____

May we contact your supervisor?

Reason for Leaving _____

Employment History/Work Experience Continued

(3) Employer _____ Title _____

Address _____

Dates Employed: _____ to _____ Full Time Part Time Hrs/Wk

Job Responsibilities:

Supervisor's Name _____

Supervisor's Phone _____ Email Address _____

May we contact your supervisor?

Reason for Leaving _____

(4) Employer _____ Title _____

Address _____

Dates Employed: _____ to _____ Full Time Part Time Hrs/Wk

Job Responsibilities:

Supervisor's Name _____

Supervisor's Phone _____ Email Address _____

May we contact your supervisor?

Reason for Leaving _____

Special Training or Experience

List any relevant computer expertise or proficiency, as well as any other skills, workshops, courses or other experience that you believe relates to the position for which you are applying. Also, list any experience or fluency in a foreign language:

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Are you able to perform the duties of the job for which you are applying with or without reasonable accommodations? ___ YES ___ NO

Have you ever been convicted of or pleaded guilty or no contest to a felony, misdemeanor or local ordinance violation (excluding minor traffic violations)? ___ YES ___ NO

Are you the subject of any pending criminal charges? ___ YES ___ NO

(A criminal conviction that does not substantially relate to the position for which you are applying will not preclude your employment with SOA)

If you answered yes to either the conviction or pending charge question, provide the details below:

Date (mm/yr)	City/State	Conviction/Pending Charge	Disposition

(Attach additional pages if needed)

If the job requires use of a motor vehicle, do you have a valid driver's license? ___ YES ___ NO ___ N/A

If the job requires it, do you have access to a vehicle? ___ YES ___ NO ___ N/A

Can you provide proof of insurance for this vehicle? ___ YES ___ NO ___ N/A

PLEASE READ AND SIGN BELOW

I certify that the facts set forth in this application are true, correct and complete without misrepresentations or omissions of any kind whatsoever. I authorize investigation of the statements I have made herein.

I understand that if any of the information on this application form is discovered to be incorrect, false or misleading or if there are any misrepresentations or omissions of any kind whatsoever, then SOA may deny me employment or terminate my employment, and I agree that SOA shall not be liable in any respect if it does so.

I understand that if I am employed by SOA, any such employment is not binding on either party for any specific period of time. I further understand that no representative of SOA, other than its president/CEO, has any authority to enter into any agreement for employment for any specified period of time and any such agreement must be in writing and signed by the president/CEO. I understand that

if employed, I will be an employee at will, meaning that the employment relationship may be ended at the choice of either party, with or without notice, and with or without cause, at any time.

I understand and agree to comply with SOA's policy of equal employment opportunity without regard to age, race, religion, ethnicity, disability, marital status, sex, sexual orientation, national origin, ancestry, citizenship, or any other protected status, as required by law.

Signature of Applicant

Date

**Serving Older Adults of Southeast Wisconsin
Employment Application
www.servingolderadults.org**



RELEASE OF INFORMATION/BACKGROUND CHECK AUTHORIZATION

I understand that any offer of employment I may receive is contingent upon an investigation of my work record and references. I also understand that any such offer may also be contingent upon the satisfactory completion of a medical exam and/or drug and alcohol screen. I understand that the following information is used to verify my identity while performing background checks.

I hereby release from any and all liability all representatives of Serving Older Adults of Southeast Wisconsin, Inc. (SOA) for their acts performed in connection with evaluating my employment application, background, credentials and qualifications. I hereby further authorize any party including the companies, schools, and organizations and persons listed in this application to release any information they may have about me to SOA, including all transcripts, school records and all personnel records with prior employers. I also release all persons, companies, schools and organizations (and such persons connected with them) who provide such information to SOA from any and all liability for any damage for giving this information.

Name: _____
 First Name Middle Name Last Name

Where you ever known or employed under a different name **Including** maiden nme? If so Please List.

Social Security Number: _____ **Date of Birth:** _____

Signature of Applicant _____

Date _____



Demographic Information (Voluntary)

The following information is used to comply with SOA's recordkeeping requirements related to its contracts with local, state, and federal agencies. The information below is removed by SOA's Human Resources Department before your application is forwarded to the hiring manager for consideration. While providing the information is voluntary, we do appreciate your consideration in doing so.

Name: _____
 First Name Middle Initial Last Name

Gender: ___ Male ___ Female ___ Other

Birthdate: _____ **Age:** _____
 mm/dd/yyyy

Ethnicity/Race:

- ___ African-American (not of Hispanic origin)
- ___ Native American (not of Hispanic origin)
- ___ Hispanic
- ___ Asian (not of Hispanic origin)
- ___ White (Not of Hispanic origin)
- ___ More than one race and/or ethnic group