



Application for Employment

RCEA is an equal opportunity employer and provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, disability, genetic information, marital status, amnesty, or status as a covered veteran, or any other protected status in accordance with applicable federal, state and local law.

Applicant name: _____ Date: _____

Position(s) applied for or type of work desired: _____

Address: _____

Telephone #: _____ Email: _____

Type of employment desired: full-time _____ part-time _____ temporary _____

Date you will be available to start work: _____

Are you able to meet the attendance requirements? ___ Yes ___ No

Do you have any objection to working overtime if necessary? ___ Yes ___ No

Can you travel if required by this position? ___ Yes ___ No

Can you provide proof of a valid drivers license, if required for this position? ___ Yes ___ No

Can you submit proof of legal employment authorization and identity? ___ Yes ___ No

If you are under 18, can you furnish a work permit if it is required? ___ Yes ___ No

How were you referred to us? _____

Employment History

Please provide all employment information for your past three employers starting with the most recent. (must be completed)

Employer: _____ Position held: _____

Address: _____ Telephone #: _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____

Job summary: _____

Reason for leaving: _____

Employer: _____ Position held: _____

Address: _____ Telephone #: _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____

Job summary: _____

Reason for leaving: _____

Employment History *continued*

Employer: _____ Position held: _____

Address: _____ Telephone #: _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____

Job summary: _____

Reason for leaving: _____

Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

Educational History

List school name and location, years completed, course of study, and any degrees earned:

High School: _____

College or University: _____

Graduate: _____

Vocational, Trade or Business: _____

Certificates of Professional or vocational competence: _____

References

List 3 references names, telephone numbers, and years known (do not include relatives or employers):

I hereby authorize RCEA, the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I understand my employment may be contingent upon successful completion of a criminal history background check. Should a search of public records (including records documenting an arrest, indictment, conviction, civic judicial action, tax lien, or outstanding judgment) be conducted by internal personnel employed by the Company, I am entitled to copies of any such public records obtained by the Company. If I am not hired as a result of such information, I am entitled to copies of any such records.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: _____

Date: _____