



Coalition for the Homeless (C.H.C.F.) of Central Florida, Inc.

Application for Employment

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

PERSONAL INFORMATION

TODAY'S DATE:

Name (<i>Last Name First, M.I.</i>)		Social security number	
Present address	City	State	Zip code
Permanent address	City	State	Zip code
Phone no. (with area code)	Referred by:		

EMPLOYMENT

Position desired:	Full time or part-time?	Date you can start	Salary desired:
Are you employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, may we inquire of your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

EDUCATION HISTORY

Name and location of school	Years attended	Did you graduate?	Subjects studied
High school			
2 Year college (<i>if applicable</i>)			
4 Year college (<i>if applicable</i>)			
Graduate school (<i>if applicable</i>)			
Trade, business or correspondence school			

GENERAL INFORMATION

What is your primary language?	
Do you speak a second language? <input type="checkbox"/> Yes <input type="checkbox"/> No What language?	If YES, do you read and write in that second language? <input type="checkbox"/> Yes <input type="checkbox"/> No
Subjects of special study/research work or special training/skills:	
U.S. military service	Rank

FORMER EMPLOYERS (*List below last four employers, starting with the most current*)

Date Month and year	Name & address of current employer	Salary	Position	Reason for leaving
From		Beginning		
To		Ending		
Immediate supervisor, title, and phone #		Job summary		

Date Month and year	Name & address of employer	Salary	Position	Reason for leaving
From		Beginning		
To		Ending		
Immediate supervisor, title, and phone #		Job summary		

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From		Beginning		
To		Ending		
Immediate supervisor, title, and phone #		Job summary		

REFERENCES (Give below the names of three persons not related to you, whom you have known at least one year.)

Name	Address	Phone number	Business	Years known

ADDITIONAL INFORMATION

Are you able to perform the essential functions of the position as listed and described on the attached job description or as demonstrated by the company representative with or without a reasonable accommodation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can you work flexible hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you able to meet the attendance requirement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have any objection to working overtime if necessary?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been involuntarily terminated or requested to resign?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you own a personal vehicle?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can you travel if required by this position?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been previously employed by the C.H.C.F.?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you related to any current employees of the C.H.C.F.?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a U.S. citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can you submit proof of legal employment authorization and identity?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you at least 18 years of age?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you are under 18, can you furnish a work permit if it is required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of a crime or been a defendant in a civil action for an intentional tort?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If YES, please explain (<i>a conviction will not automatically bar employment</i>)		
Driver's license number (<i>if driving is an essential job duty</i>):		
How were you referred to us?		

