



THE CENTER

FOR THE ARTS & SCIENCES

400 College Blvd., Clute, TX 77531

979-265-7661

APPLICATION FOR EMPLOYMENT

The Center is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap or national origin.

PERSONAL INFORMATION

		Date	Social Security Number	
Name				
	Last	First	Middle	
Present Address				
	Street	City	State	Zip
Permanent Address				
	Street	City	State	Zip
Home Phone Number	Cell Phone Number	E-mail Address		
Referred By		Are you 18 years of age or older		<input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT DESIRED

Position	Date You Can Start	Salary Desired
Are You Employed Now?	<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
Ever Applied to The Center Before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If So When?

EDUCATION

	Name and Location of School	Circle Last Year Completed	Did You Graduate?	Subjects Studied and Degree(s) Received
Grammar School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
High School		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade, Business or Correspondence School		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

GENERAL

Subjects of Special Study or Research Work

Job Related Skills (typing, driver's license, etc.)

Activities Other Than Religious (Civic, Athletic, etc.)

EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, SEX, COLOR OR NATIONAL ORIGIN OF ITS MEMBERS

(Continued on Other Side)

FORMER EMPLOYERS

List below your last four employers, starting with the most recent one first.

Date Month and Year	Name and Address of Employer	Phone Number	Position & Salary	Reason for Leaving
From				
To			\$	
From				
To			\$	
From				
To			\$	
From				
To			\$	

REFERENCES

List below three persons not related to you, whom you have known at least one year.

You must include a Contact Phone Number for each Reference

Name	Address	Contact Phone Number	Years Acquainted
1			
2			
3			

If you are to be hired by The Center, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire or dismissal if I have been employed, no matter when discovered by The Center.

I understand that any employment is conditioned on a background check. I authorize The Center to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to The Center, without giving me prior notice of such disclosure. In addition, I release The Center, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or The Center. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon The Center unless made in writing.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by The Center and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to The Center the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test.

I understand that filling out this form does not indicate there is a position open and does not obligate The Center to hire. If hired, I agree to abide by all The Center's work rules, policies and procedures. The Center retains the right to revise its policies or procedures, in whole or in part, at any time.

Date _____

Signature _____