

**Old Pueblo Community Services  
Employment Application**



***It is The Old Pueblo Community Service's policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, or other protected classification.***

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
Street and Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone # \_\_\_\_\_ Are you over 18 years old?  Yes  No

Are you authorized to work in the U.S. on an unrestricted basis?  Yes  No

How did you learn of this opening? \_\_\_\_\_

Have you worked here before?  Yes  No

Have you been shown a copy of the position description?  Yes  No

Can you perform the essential functions listed in the position description with or without reasonable accommodation?  Yes  No

Are there any hours or days you cannot or will not work? \_\_\_\_\_

Which status would you prefer?  Part-Time  Full-Time

Are you willing to work overtime as required?  Yes  No

Do you have any outstanding warrants?  Yes  No

Are you under supervision?  Yes  No

Have you ever been convicted of a felony?  Yes  No

(Conviction will not necessarily disqualify an applicant for employment.) If yes, describe:

\_\_\_\_\_  
\_\_\_\_\_

Position Desired \_\_\_\_\_

Salary Desired \_\_\_\_\_

Start Date Desired \_\_\_\_\_

***Education History:***

Education	School Name & Location	Year Graduated	Major Course of Study	Diploma or Degree
High School				
College/University				
College/University				
Other				

Aside from educational and work experiences, what other experiences, skills or qualifications would especially fit you for work with Old Pueblo Community Services?

\_\_\_\_\_  
\_\_\_\_\_

May we contact your current employer, if applicable?  Yes  No

***Work History:***

**Current Employer (if applicable)**

Name:	Address:
Date Hired:	Starting Position and Salary:
Date Left:	Position on Leaving and Salary:
Name and Title of Supervisor:	Telephone Number:
Description of Duties:	Reason for Wanting to Leave:

**Most Recent Previous Employer**

Name:	Address:
Date Hired:	Starting Position and Salary:
Date Left:	Position on Leaving and Salary:
Name and Title of Supervisor:	Telephone Number:
Description of Duties:	Reason for Leaving:

**Previous Employer**

Name:	Address:
Date Hired:	Starting Position and Salary:
Date Left:	Position on Leaving and Salary:
Name and Title of Supervisor:	Telephone Number:
Description of Duties:	Reason for Leaving:

***Applicant's Certification and Agreement***

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize The Old Pueblo Community Services to make an investigation of any of the facts set forth in this application.

I understand that employment at The Old Pueblo Community Services is "at-will," which means that either I or The Old Pueblo Community Services can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor or manager of The Old Pueblo Community Services, other than the Executive Director has any authority to alter the foregoing.

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

We require references and salary history.

# REQUEST FOR EMPLOYMENT INFORMATION

Previous Employers: (please list at least three)

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Applicant Name \_\_\_\_\_ SSN: \_\_\_\_\_

Has applied for a position with the Old Pueblo Community Services. We would appreciate your assistance with our evaluation of this applicant by providing us with the information requested. A stamped, self-addressed envelope is enclosed for your convenience. **If this applicant is not familiar to you, please forward to the Human Resources department for verification of employment.** Thank you.

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## APPLICANT'S CERTIFICATION/RELEASE:

This is authorization to furnish the Old Pueblo Community Services, with the information requested below. I hereby release you and the Old Pueblo Community Services, from all liability for any damage whatsoever arising therefrom.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

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## TO BE COMPLETED BY PREVIOUS EMPLOYER:

Employment Dates: \_\_\_\_\_ to \_\_\_\_\_

Position Held: \_\_\_\_\_

Salary Upon Leaving: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Would you rehire?  Yes  No If "No," could you please explain?

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Please circle or highlight the appropriate response: (1 lowest - 4 highest)

Leadership Qualities	1	2	3	4
Attendance	1	2	3	4
Follows Directions	1	2	3	4
Team Player	1	2	3	4
Communicates Effectively	1	2	3	4
Self-Motivated	1	2	3	4

Thank you for your input. All information given is held in the strictest confidence.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_