

Are you applying for a position that requires a commercial driver's license? YES NO
To obtain a CDL you must be at least 21 yrs. of age and have driven for 3 years.

Driver's License Number _____ State _____ Expiration Date _____

CDL License Number _____ State _____ Expiration Date _____

A current DMV check will be made and maintained.

EDUCATION

Circle Highest Level of Education Completed:

High School 9 10 11 12 College 1 2 3 4 5 6 Post Graduate 1 2 3 4 GED Date _____

School Name Address Course of Study Degree/Diploma GPA

College

Post Graduate or Other

WORK HISTORY AND MILITARY SERVICE

Do Not Skip any job, and use a separate sheet, if necessary. Begin with your present employer. Include Military service, if any. May we contact your present employer for a reference? YES _____ NO _____ If not, Why?

Please fully explain any gaps in employment:

Dates of Employment	Company Name And Address	Supervisor's Name Title & Phone #	Describe Job Duties	Salary	Reason for Leaving
From _____					
To _____					
From _____					
To _____					

From _____ To _____
From _____ To _____
From _____ To _____
From _____ To _____

PERSONAL REFERENCES – Do Not List Relatives

Name/Occupation	Address	Telephone #	Years Known
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____

You may be required to provide individual letters of Reference, if it is a requirement of the Program's Funder.

EMPLOYMENT APPLICATION CONSENT FORM

I, _____, authorize Southwestern Community Action Council, Inc. and/or its agents to conduct an independent investigation of my background, references, past employment, education, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of verifying the information contained on this application. I also understand I will be required to submit to a pre-employment Drug Screen at a facility provided by SCAC.

I release Southwestern CAC, Inc. and/or its agents and any person or organization that provides information related to this authorization from any and all liabilities, claims, or lawsuits in regard to the information obtained from any of the above.

I confirm that all information on this application is correct and complete. I understand that any misstatement of facts will be grounds for the disqualification of this application. If hired, a misrepresentation will be grounds for discharge.

I have been informed that SCAC, Inc. is an Equal Employment Opportunity employer and does not discriminate on the basis of race, sex, age, disability, veteran status, religion, sexual orientation, color or national origin.

Nothing on this application is intended to create or imply a contractual relationship. If I am hired, I understand that employment is “at will”, is not for any specific time period, and can be terminated by either party with or without reason at any time.

I understand that SCAC, Inc. serves a multiple county area and I may be required to serve in any and/or all counties at any time during my employment.

PLEASE PRINT

Name: _____

Other names used: _____

Former Address (if less than 5 years at address on first page of application)

Date available for employment: _____

Signing below indicates you have read the application and understand and agree with its contents:

Signature of Applicant

Date