



Application for Employment

Last Name: _____ First Name: _____ Initial: _____

Application Date: _____ Date Available: _____

Position for which you are applying: _____

How did you learn of this position: _____

Email Address _____

Are you a U.S. Citizen? Yes No Are you legally eligible to work in the United States? Yes No
(Proof of citizenship or immigration status will be required upon employment)

Address _____ Street/Box# _____ City/State _____ Zip Code _____

Home phone _____ Cell Phone _____

Are you currently employed? Yes No May we contact your employer? Yes No
 Can you travel if a job requires it? Yes No

Have you ever been convicted of, or entered a plea of guilty to, a felony? Yes No
 Are you on the sex offender registry? Yes No
 Do you have a record (or deferred judgment) of founded child or dependent adult abuse or have you ever been convicted of a crime in this state or any other state (Iowa Code 237A) Yes No
 (If you answered yes to any question, attach additional sheet with date, charge, place and court.)

Education

Level	Name of School	Location	Semester Hours Earned	Degree (major/minor)	Date of Graduation
High School					
Post High School Technical Training					
Undergraduate College/University					
Graduate Work					

Special skills and qualifications acquired from employment or other experience: _____

Educational Activities and Honors: _____

Specialized Training, Apprenticeship, Skills: _____

Check those that you have ability to perform or for which you have had experience/training.

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Keyboarding/Typing Speed _____ | <input type="checkbox"/> Computer _____ | <input type="checkbox"/> Data Entry _____ | <input type="checkbox"/> Cash Receipts _____ |
| <input type="checkbox"/> Filing/Organization _____ | <input type="checkbox"/> Directing Children _____ | <input type="checkbox"/> First Aid _____ | <input type="checkbox"/> Contacting the Public _____ |
| <input type="checkbox"/> Copy Machine _____ | <input type="checkbox"/> Accounting/Bookkeeping _____ | <input type="checkbox"/> Adding Machine/10 key Calculator _____ | |
| <input type="checkbox"/> Tax Reports _____ | <input type="checkbox"/> Payroll _____ | | |

Summarize additional information to describe your full qualifications.

Employment Experience

Start with your present or most recent job. Include military service assignments and volunteer activities. Exclude organization names which indicate a protected status. If you need additional space, please continue on a separate sheet of paper.

Employer: _____ From: _____ To: _____ Salary: _____

Address: _____

Supervisor's Name: _____ Phone: _____

Full-Time Yes No If no, number of workdays each year if employed part time or less than 6 months

Job Title: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

Employer: _____ From: _____ To: _____ Salary: _____

Address: _____

Supervisor's Name: _____ Phone _____

Full-Time ___ Yes___ No If no, number of workdays each year if employed part time or less than 6 months

Job Title: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

References: List two people not related to you who have definite knowledge of your qualifications for the position for which you are applying. (Please list address, phone number and relationship for each).

Siouxland Human Investment Partnership does not discriminate on the basis of race, creed, color, religion, national origin, gender, age, marital status, sexual orientation, gender identity or disability in its educational programs, activities and employment practices. Questions or grievances related to this policy may be addressed to: Matt Ohman 2540 Glenn Avenue., Sioux City, IA 51106, or mohman@siouxlandship.org. Information provided to Siouxland Human Investment Partnership is accurate and complete to the best of my knowledge:

Signature _____

Date _____