

The Promise Resource Center Application for Employment

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a résumé, but all questions must be answered.

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Position Applyir	ng For:								
PERSONAL DA	TA								
Name (last, first, mi	iddle)								
Street Address and/o	or Mailing Add	dress		City	City		State	Zip	
Home Telephone Nu	mber				Mobile Number			•	
Date you can start work					Do you have a High School Diploma or G Yes ☐ No ☐				
Hours: Full Time Part Time Are you authorized to work in the U.S. on an unrestricted basis? Yes No									
Have you ever been	convicted of a	a felony? (Conviction	ons will not necessarily d	lisqualify an app	olicant for	employment.)	Yes 🗌	No 🗌	
If yes, explain:									
Yes	No 🗆		or have you been viewed with or without reasona				sential function	ons of the job?	
QUALIFICATIO			or training you feel rela es, vocational or technic				elp you perfo	orm the work, such as	
		School	Name	Degree		n/Year luated	Add	dress/City/State	
School									
School									
Other									
SPECIAL SKILL	S List any sp	oecial skills or exper	ience that you feel would	help you in the p	osition tha	at you are applying	for (leadershi	p, organizations/teams, etc	:.)
REFERENCES	Please list the supervisor re	ease list three professional references not related to you, with full name, address, phone number, and relationship. Two pervisor references preferred							
Name			Address/City/State			Pl	none	Relationship	
									_



Applicant Signature

RESOURCE CENTER								
WORK HISTORY Start with your present or most recent employn	nent and work back. Use separate sheet if necessary. (IN	NCLUDE PAID AND UNPAID POSITIONS)						
Job Title #1	Start Date (mo/day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's Name	Phone Number						
City	State	Zip						
Duties:								
Reason for Leaving								
May we contact your present employer?	Yes No N/A							
Job Title #2	Start Date (mo/day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's Name	Phone Number						
City	State	Zip						
Duties:								
Reason for Leaving								
Job Title #3	Start Date (mo/day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's Name	Phone Number						
City	State	Zip						
Duties:								
Reason for Leaving								
Job Title #4	Start Date (mo/day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's Name	Phone Number						
City	State	Zip						
Duties:		,						
Reason for Leaving								
I certify that the facts set forth in this Application for Employ employed, false statements, omissions or misrepresentation investigation of any of the facts set forth in this application a application. I acknowledge and understand that the compar of category employee) may resign at any time, just as the emwith or without cause, with or without notice to the other par	ns may result in my dismissal. I authorize Pro nd release PRC from any liability. PRC may c ny is an "at will" employer. Therefore, any en nployer may terminate the employment relat	omise Resource Center (PRC) to make an ontact any listed references on this nployee (regular, temporary, or other type						

Date