



Employment Application

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Position Applied for	Desired Salary	Date Available	
Are you a citizen of the United States?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Referred By	Are you 18 years of age or older?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever been convicted of a felony?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain	
EDUCATION			
High School	Location		
Years Completed	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
College	Location		
Last Year Completed	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree(s) Received/Subjects Studied	
Other	Location		
Last Year Completed	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree(s) Received/Subjects Studied	
GENERAL			
Job Related Skills (typing, driver's license, first aid/cpr, etc.)			
Subjects of Special Study/Activities other than Religious (civic, athletic, etc.):			
REFERENCES			
<i>Please list below three non-related personal references.</i>			
Name	Title/Relationship		
Address	Phone		
Name	Title/Relationship		
Company/Address	Phone		
Name	Title/Relationship		
Company/Address	Phone		

We are **equal opportunity employer, dedicated to a policy of non-discrimination in employment** on any basis including race, color, age, sex, religion, disability, sexual preference or national origin.

PREVIOUS EMPLOYMENT LIST BELOW YOUR LAST THREE EMPLOYERS, STARTING WITH MOST RECENT ONE FIRST.

Employer		Supervisor	
Address		Phone	
Job Title		Salary	\$
Responsibilities			
From	To	Reason for Leaving	
May we contact this supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Employer		Supervisor	
Address		Phone	
Job Title		Salary	\$
Responsibilities			
From	To	Reason for Leaving	
May we contact this supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Employer		Supervisor	
Address		Phone	
Job Title		Salary	\$
Responsibilities			
From	To	Reason for Leaving	
May we contact this supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

DISCLAIMER AND SIGNATURE

I authorize investigation on all statements contained in this application. I understand that misrepresentation of information requested is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without cause and without any previous notice.

Signature:	Date:
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DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY

Interviewed by/Date:

Remarks:

References Checked by/Date/Comments:

Applicant Affirmative Action Program Self Identification Form

Required Information

Name: _____ **Date of Application:** _____

Position(s) for which you are applying: _____

Voluntary Information

Watauga Opportunities must comply with the regulations for equal employment opportunity and affirmative action (EEO/AA), we must track our applicants by gender and race/ethnicity and the position they applied for to the government. We are an organization that values diversity and encourages women and minorities to apply. For this reason, we invite you to indicate your gender and race/ethnicity below. This information is kept separate from your application.

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. Responses will remain confidential within the Human Resources Department; and will be used only for the necessary information to include in our Affirmative Action Program and reporting requirements to the government. When reported, data will not identify any specific individuals.

Gender: Male Female

Definitions of race/ethnicity are on the back of this page (as defined by the Equal Employment Opportunity Commission).

Race/Ethnic Identification (check one):

Are you Hispanic or Latino? Yes No

If you answered “Yes” you have completed this form. If you answered “No” please select a race from the options below.

- | | |
|--|---|
| <input type="checkbox"/> White (Not Hispanic or Latino) | <input type="checkbox"/> American Indian or Alaska Native
(Not Hispanic or Latino) |
| <input type="checkbox"/> Black or African American (Not
Hispanic or Latino) | <input type="checkbox"/> Two or More Races (Not Hispanic or
Latino) |
| <input type="checkbox"/> Native Hawaiian or Other Pacific
Islander (Not Hispanic or Latino) | <input type="checkbox"/> I do not wish to disclose. |
| <input type="checkbox"/> Asian (Not Hispanic or Latino) | |

Definitions of race/ethnic categories

Hispanic of Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above five races.