(Ţ	30	2,0	
	-	Sale Sale	-	
3		ST	ale	2
	· y I	s_1	Ir.	

Application for Employment _

CROS policy is to provide equal employment opportunity to all applicants for employment without regard to race, color, religion, national origin, disability, gender, veteran status, marital status, sexual orientation, age, or other unlawful discriminatory characteristics as defined in federal, state, or local laws.

PERSONAL INFORMA	TION		Date of A	pplication:		
Name:	Last	First		Middle		
Address						
AddressStree	eet	City		State	Zi)
If less than 5 years at curre	nt address, list previ	ious address				
Address						
Stre	eet	City		State	Zip	
Home Phone	Cell Phone		E-mail	Address		
Position Applying For		_		Date Availab	le for Work	
Desired Salary/Wage: \$_		_ Are y	ou currently	/ employed?	☐ YES	□NO
 Are you a U.S. citizen? Can you provide proof of elig Are you able to perform the c Do you have a valid driver's I Do you have a legal and func Have you ever been convicted. Are you currently awaiting trial 	duties of the position with icense? ctional vehicle? ed of, or plead guilty or nal, sentencing, or other of	n reasonable ac olo contendere disposition of a	, or no contest criminal charg		☐ YES	□ NO
If you answered yes to 6 or 7, plea	ase explain the situation	and disposition	1.			
EDUCATION						
School Name	Loc	ation	Years in Attendance	Degree Received	Major or Fie	ld of Study
Other training, certifications	or licenses held:					

EMPLOYMENT

Please list your work experience for the past five years beginning with your most recent job held. You should account for time unempoloyed and include volunteer work. If self-employed, give firm name.

Current/Last Employer Name	Employment Dates	
	From:	То:
Address	Pay or Salary	
	Start:	Final:
City/State/Zip	Phone	
Your last job title	Supervisor Name	
List your primary responsibilities, skills, and accomplishments with this job)	
List your reason for leaving (be specific)		
May we contact them? ☐ YES ☐ NO		
Employer Name	Employment Dates	
	From:	То:
Address	Pay or Salary	
	Start:	Final:
City/State/Zip	Phone	
Your last job title	Supervisor Name	
,		
List your primary responsibilities, skills, and accomplishments with this job)	
List your reason for leaving (be specific)		
, , , , , , , , , , , , , , , , , , , ,		

Employer Name	Employment Dates	
	From:	То:
Address	Pay or Salary	
	Start:	Final:
City/State/Zip	Phone	
Your last job title	Supervisor Name	
List your primary responsibilities, skills, and accomplishments with this jo	b	
List your reason for leaving (be specific)		
List your reason for leaving (be specific)		
May we contact them? ☐ YES ☐ NO		
Employer Name	Employment Dates	
Employer Name	Employment Dates From:	To:
Employer Name Address	From:	To:
		To: Final:
	From: Pay or Salary	
Address	From: Pay or Salary Start:	
Address	From: Pay or Salary Start:	
Address City/State/Zip	From: Pay or Salary Start: Phone	
Address City/State/Zip	From: Pay or Salary Start: Phone Supervisor Name	
Address City/State/Zip Your last job title	From: Pay or Salary Start: Phone Supervisor Name	
Address City/State/Zip Your last job title	From: Pay or Salary Start: Phone Supervisor Name	
Address City/State/Zip Your last job title List your primary responsibilities, skills, and accomplishments with this jo	From: Pay or Salary Start: Phone Supervisor Name	

In addition to your work experience, are there other skills, qualifications, or experience that we should consider?				
REFERENCES				
List three references, not related to you, who have known you	ou for more than one year, one personal and	two work related.		
Name (Personal Reference)	Phone	Years Known		
Address/City/State/Zip				
Name (Work-related Reference)	Phone	Years Known		
Address/City/State/Zip				
Name (Work-related Reference)	Phone	Years Known		
Work related Neighbors	THOIC	Todis Miowii		
Address/City/State/Zip				
It is the policy of CROS Ministries that newly hired employments and background check results are returned. All earned any other background check deemed necessary for the made on a case-by-case determination, based on legal conviction and the job.	employees are subject to criminal history change position or for the protection of the organ requiremeths and/or standards for the position.	neck, driver's license check, nization. Evaluations will be		
ACKNOWLEDGMENT & AUTHORIZATION	Please read before s	igning:		
I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment desision.				
I agree that CROS Ministries and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. I understand that employment is "at will," which means that either I or CROS Ministries 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.				
In compliance with the Immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to CROS Ministries that verifies my right to work in the United States.				
I herebyby acknowledge that I have read and understand the above statements.				
Signature	Date			