

## **Application for Employment**

United Community Action Network 280 Kenneth Ford Drive Roseburg, OR 97470

Equal Opportunity Employer

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

DIRECTIONS: Answer every question. If a question is not applicable to you, enter NA (not applicable). Resumes may be attached for reference only.

You will know that your application has been successfully submitted when you: See a popup that your application has been received -or- Reach a page asking for statistical information (after hitting the submit button) -or- Receive an email confirmation (if you entered an email address).

| Last Name       | First Name     |      | Middle Name   | Po    | osition Applied For |                     |
|-----------------|----------------|------|---------------|-------|---------------------|---------------------|
|                 |                |      |               |       |                     |                     |
| Street          |                | City |               | State | e Zip               | For Office Use Only |
|                 |                |      |               |       |                     |                     |
| Mailing Address |                | City |               | State | e Zip               |                     |
|                 |                |      |               |       |                     |                     |
| Primary Phone S | econdary Phone |      | Email Address |       |                     |                     |
|                 |                |      |               |       |                     |                     |

#### For driving positions only:

| Do you have a val | id Drivers' License? | Do you have a valid | Commercial Drivers' License | Do you have the mini | mum required insura | ance on |
|-------------------|----------------------|---------------------|-----------------------------|----------------------|---------------------|---------|
|                   |                      | with Medical Card a | and Passenger Endorsement?  | your car?            |                     |         |
| Yes               | No                   | Yes                 | No                          | Yes                  | No                  |         |
|                   |                      |                     |                             |                      |                     |         |

| Do you have an O | ffice of Childcare Cent | ral Background Registry Number? (include a copy of your letter with this application) |
|------------------|-------------------------|---|
| Yes              | No                      |   |

| If necessary, the best ti  |                                  | Best Phone       | Type of employme   |                         |                  |           |
|----------------------------|----------------------------------|------------------|--------------------|-------------------------|------------------|-----------|
|                            |                                  |                  |                    |                         | Full time        | Seasonal  |
|                            |                                  |                  |                    |                         | Part time        | Temporary |
| May we contact you at      |                                  |                  | Will you travel    | if the job requires it? |                  |           |
| Yes                        | No                               |                  |                    |                         | Yes              | No        |
| Have you ever been em      | ployed here before? If yes, give | dates            | Will you work of   | vertime if required?    | lf no, explain   |           |
| Yes                        | No                               |                  | Yes                | No                      |                  |           |
| Are you legally eligible f | or employment in this country?   | Are you a former | client of this cor | npany?                  | Date available f | or work   |
| Yes                        | No                               | Yes              | No                 |                         |                  |           |

# **EMPLOYMENT HISTORY**

### Starting with your most recent employer, list your last five (5) employers.

| Employer               |                        |       |           | Telephone # | Dates employed |            |
|------------------------|------------------------|-------|-----------|-------------|----------------|------------|
| Address                |                        |       |           | City        | State          |            |
| Starting job title     |                        |       | Final job | title       | I              | Avg Hrs/Wk |
| May we contact this er | nployer for reference? | ?     |           |             |                | •          |
| Yes                    | No                     | Later |           |             |                |            |
| Why did you leave?     |                        |       |           |             |                |            |
| Summarize the type o   |                        |       |           |             |                |            |
| What did you like mos  | about your position?   |       |           |             |                |            |
| What did you like leas | t about your position? |       |           |             |                |            |

| Employer              |                           |                   | Telephone #     | Dates employed |            |
|-----------------------|---------------------------|-------------------|-----------------|----------------|------------|
| Address               |                           |                   | City            | State          |            |
| Starting job title    |                           | F                 | Final job title |                | Avg Hrs/Wk |
| May we contact this   | employer for reference?   |                   |                 |                |            |
| Yes                   | No                        | Later             |                 |                |            |
| Why did you leave?    |                           |                   |                 |                |            |
|                       |                           |                   |                 |                |            |
| Summarize the type    | of work performed and job | responsibilities? |                 |                |            |
|                       |                           |                   |                 |                |            |
|                       |                           |                   |                 |                |            |
|                       |                           |                   |                 |                |            |
|                       |                           |                   |                 |                |            |
|                       |                           |                   |                 |                |            |
|                       |                           |                   |                 |                |            |
| What did you like mo  | ost about your position?  |                   |                 |                |            |
|                       |                           |                   |                 |                |            |
| What did you like lea | ast about your position?  |                   |                 |                |            |
|                       |                           |                   |                 |                |            |
|                       |                           |                   |                 |                |            |

| Employer                      |                              |                       |             | Telephone # | Dates employed |            |
|-------------------------------|------------------------------|-----------------------|-------------|-------------|----------------|------------|
| Address                       |                              |                       |             | City        | State          |            |
| Starting job title            |                              |                       | Final job t | itle        |                | Avg Hrs/Wk |
|                               |                              |                       |             |             |                |            |
| May we contact this en<br>Yes | mployer for reference?<br>No | ?<br>Later            |             |             |                |            |
| Why did you leave?            |                              |                       |             |             |                |            |
| Summarize the type o          | f work performed and         | job responsibilities? |             |             |                |            |
| What did you like mos         | t about your position?       |                       |             |             |                |            |
| What did you like leas        | t about your position?       |                       |             |             |                |            |

| Employer                   |                    |       |           | Telephone # | Dates employed |            |
|----------------------------|--------------------|-------|-----------|-------------|----------------|------------|
| Address                    |                    |       |           | City        | State          |            |
| Starting job title         |                    |       | Final job | title       |                | Avg Hrs/Wk |
| May we contact this empl   | oyer for reference | ?     |           |             |                |            |
| Yes                        | No                 | Later |           |             |                |            |
| Why did you leave?         |                    |       |           |             |                |            |
| Summarize the type of wo   |                    |       |           |             |                |            |
| What did you like most ab  |                    |       |           |             |                |            |
| What did you like least ab | out your position? |       |           |             |                |            |

| Employer               |  |       |           | Telephone # | Dates employed |            |
|------------------------|--|-------|-----------|-------------|----------------|------------|
| Address                |  |       |           | City        | State          |            |
| Starting job title     |  |       | Final job | title       |                | Avg Hrs/Wk |
| May we contact this e  | employer for reference                           | ?     |           |             |                |            |
| Yes                    | No   | Later |           |             |                |            |
| Why did you leave?     |  |       |           |             |                |            |
|                        | of work performed and<br>st about your position? |       |           |             |                |            |
| What did you like leas | st about your position?                          |       |           |             |                |            |

Please tell us about any volunteer experience you may have had (include dates and places)

Explain any gaps in your employment, other than those due to personal illness, injury or disability

If not addressed above, have you ever been fired or asked to resign from a job? If yes, please explain

# SKILLS AND QUALIFICATIONS

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the duties of the position for which you are applying

### Computer skills - include software titles and years of experience in each category

| Word Processing | Yrs Exp | Internet       | Yrs Exp |
|-----------------|---------|----------------|---------|
|                 |         |                |         |
| Spreadsheet     | Yrs Exp | Email          | Yrs Exp |
|                 |         |                |         |
| Presentation    | Yrs Exp | Other software |         |
|                 |         |                |         |

## EDUCATIONAL BACKGROUND

Starting with your most recent school attended, provide the following information. For teaching positions, include transcripts with this application.

| Name of School Attended | Years<br>Completed | Degree or<br>Diploma |
|-------------------------|--------------------|----------------------|
|                         |                    |                      |
|                         |                    |                      |
|                         |                    |                      |
|                         |                    |                      |
|                         |                    |                      |
|                         |                    |                      |

## REFERENCES

List names and contact information for three (3) business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

| Relationship to you | Email address | Telephone                          | Yrs known                                     |
|---------------------|---------------|------------------------------------|---|
|                     |               |                                    |   |
|                     |               |                                    |   |
|                     |               |                                    |   |
|                     |               |                                    |   |
|                     |               |                                    |   |
|                     |               |                                    |   |
|                     |               | Relationship to you  Email address | Relationship to you  Email address  Telephone |

# **RELATED INFORMATION**

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, genetic information, citizenship, age, mental or physical disabilities, veteran/reserve, National Guard or any other similarly protected status

Organization(s) and Office(s) Held

List special accomplishments, publications, awards, etc.

Exclude accomplishments that would reveal race, color, religion, sex, national origin, genetic information, citizenship, age, mental or physical disabilities, veteran/reserve, National Guard or any other similarly protected status

Special accomplishments

#### Is there any other job-related information your would like us to know about?

Other job-related information

# APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references, employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

Employment is at will and is at the mutual consent of the employee and the employer. Consequently, either the employee or the employer can terminate the employment relationship at any time, with or without advance notice. The application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employers Chief Executive Officer.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the

United States and that federal immigration laws require me to complete an I9 Form in this regard.

I understand that the employer does not tolerate unlawful discrimination in its employment practices and that no question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his/her sex, race, color, religion, national origin, genetic information, citizenship, age, disability or any other protected status under local, state or federal law. Likewise, this company does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, genetic information, age disability, or any other protected status. Harassment of our employees is strictly prohibited; whether it is committed by a manager, co-worker, subordinate or non-employee. This company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information by me that is found to be false, incomplete or misrepresented in any respect will be sufficient cause to i) eliminate me from further consideration for employment or ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

I certify that I have read, fully understand and accept all terms of this Applicant Statement.

I understand that I am required to submit a complete application and that my failure to do so may result in

disqualification from consideration for the position.

Signature

Date

# **Employment Analytics Questionnaire**

The following information is for statistical and data gathering purposes only. **Providing this information is entirely voluntary and will not adversely affect your employment.** All information is confidential and will not be seen by supervisors or other program employees.

### **Equal Employment Opportunity and Veteran's Preference**

Under affirmative action state and federal guidelines and certain veteran acts, this company is required to identify employees by ethnicity, race, gender, and veteran status.

| Gender:         |   |  |
|-----------------|---|--|
|                 |   |  |
| Ethnicity:      | Hispanic                                | Not Hispanic                                     |
|                 |   |  |
| Race:           | White (only)                            | Black or African American (only)                 |
|                 | Asian (only)                            | Native Hawaiian or other Pacific Islander (only) |
|                 | American Indian or Alaska Native (only) | Two or more races (non-Hispanic)                 |
|                 |   |  |
| Veteran Status: | Special Disabled Veteran                | Vietnam Era Veteran                              |
|                 | Newly Separated Veteran                 | Other Protected Veteran                          |

Are you aware of any past/present medical problems or mental or physical disability that might interfere with your performance of job-related functions as outlined in the job announcement? If yes, explain fully (including job accommodation needed).