

## **Application for Employment**

**Middle Kentucky Community Action Partnership**, **Inc**. is an Equal Opportunity Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

Please type or print: Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.")

APPLICANT INFORMATION											
Last Name		First Name			M.I.	Date					
Mailing Address											
City		State				Zip					
Home Phone Number		E-mail Address (Optional)									
Cell Phone Number		Alternate Phone Number									
EMPLOYMENT DESIRED											
Position		Date you can Start?			Salary Desired						
Are you employed now	v?	YES 🗌	NO 🗆	If so may we inquire of your present employer?			NO 🗆				
Are you currently emp	YES 🗌	NO 🗆	If yes, what is your current Job title & department?								
Are you related to any employee?	YES 🗌	NO 🗆	If yes, their name and relationship to you?								
Have you ever worked	YES 🗌	NO 🗆	If so, when?								
Have you ever been employed at another Community Action Agency?		YES 🗌	NO 🗆	If so, may we contact them? YES $\square$ NO $\square$				NO 🗆			
Are you a citizen of the United States?		YES 🗌	NO 🗆	If no, are you authorized to work in the U.S.? YES $\square$ NO $\square$				NO 🗆			
Have you ever been convicted of a felony?		YES 🗌	NO 🗆	If yes, explain							
Are you 18 years of age or older?		YES 🗌	NO 🗌	Referred by							
If required for position, do you have a valid driver's license?		YES	NO 🗆								
EDUCATION											
	Name and Location of Sch	and Location of School		Number of years attended		duate?	Subjects Studied				
High School/GED											
College											
Trade, Business or Correspondence School											

SKILLS: Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and										
	ou have a working knowledge, and r									
PREVIOUS EMPLOYMENT										
	the last two employers. PLEASE DO N	IOT complete t	his informatio	n with the notation "S	See Resume." PLEASE					
	ves the right to contact all current and fo									
Date month & year	Name and address of employer		Salary	Kind of work	Reason for leaving					
From			\$		_					
То										
·			per hour							
From			\$							
То			per hour							
REFERENCES			1	<b>"</b>						
Please list two persons not re	elated to you, whom you have known	at least one	year.							
Full Name										
Company		Phone								
Address										
Full Name										
Company		Phone								
Address										
DISCLAIMER AND SIGNAT	TURE									
PLEASE READ CAREFULLY AND SIGN TI	HAT YOU UNDERSTAND AND ACCEPT THIS INFO	RMATION.								
I certify that the information on this application and its supporting documents is accurate and complete to the best of my knowledge. I understand and agree that failure to fully complete the form,										
Middle Kentucky to investigate, without lia	presents grounds for elimination from consideration for ability, all statements contained in this application and s	supporting materials	. I authorize refer	ences and former employers	s, without liability, to make full					
screening for illegal substances and alcohol u	this application for employment. If requested, I agree upon conditional offer of employment. I understand the discontinuous applications to the conditional offer of employment.	at this document is	NOT an offer of er	nployment, and that an offe	r of employment, if tendered,					
does NOT constitute a contract for continued guaranteed employment. I understand that employees of <b>Middle Kentucky</b> are hired at-will, and the employment relationship may be terminated at any time by either party, for any and/or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off.										
If employed as a full time, benefits-eligible b	pasis, I understand that I would be required to make make	andatory contribution	ons to the Kentucky	y Retirement System. I und	erstand that any benefits					
	ntinuation at any time without prior notice. I understar or promotion and during which I may be terminated wit			ii empioyment represent a p	rovisional peniou, during which					
Applicant Signature: Date:										
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