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APPLICATION FOR EMPLOYMENT

Applicants are considered for employment without regard to race, color, national origin, religion, sex, age, marital or veteran's status, physical handicap or medical condition. All applicants must be able to pass a background check. Other than minor traffic violations, a conviction of any kind; including misdemeanors, felonies, convictions that occurred a long time ago and convictions that have been expunged; will make an applicant ineligible for employment.

PLEASE PRINT

Date Social Security #

Name Last First Middle Initial

Address Street

City State Zip How Long?

Current Phone # Home Business or message

Previous Address (if at current address Less than 5 years) Street

checkbox checkbox

City State Zip How Long?

Position Desired checkbox Full-time checkbox Part-time

Salary Desired Date available

How did you learn of our organization:

Have you previously applied for employment with the NMCS? checkbox Yes checkbox No If yes, when

Have you ever been convicted of crime other than a minor traffic violation? (This includes misdemeanors, felonies, convictions that occurred a long time ago, and convictions that have been expunged.) checkbox Yes checkbox No

Are you legally eligible to work in the United States? Yes No (The Federal Immigration Reform and Control Act of 1986 makes it unlawful to hire an alien not authorized to work in the United States. If hired you will be required to show proof of employment authorization.)

Job offer may be made contingent on passing a job-related physical examination.

Why would you like to be part of NMCS?

Blank lines for answer

EMPLOYMENT HISTORY

Beginning with your most recent employment, list your experience, including part-time and relevant volunteer experience.

Company _____ Phone Number _____

Address _____

Name of supervisor _____ Employed from _____ to _____

Starting position _____ Last position _____

How long in last position? _____ Ending salary _____

Summarize your duties and responsibilities (omit if resume is provided): _____

Reason for leaving: _____

Company _____ Phone Number _____

Address _____

Name of supervisor _____ Employed from _____ to _____

Starting position _____ Last position _____

How long in last position? _____ Ending salary _____

Summarize your duties and responsibilities (omit if resume is provided): _____

Reason for leaving: _____

Company _____ Phone Number _____

Address _____

Name of supervisor _____ Employed from _____ to _____

Starting position _____ Last position _____

How long in last position? _____ Ending salary _____

Summarize your duties and responsibilities (omit if resume is provided): _____

Reason for leaving: _____

If you have any other relevant work experience, please include it on a separate sheet of paper.

EDUCATION

Name	Address	Major	GPA	Diploma/ Degree
High School		n/a		n/a
College/University				
College/University				
Graduate School				
Specialized Education				

List Academic Honors: _____

List clubs, professional societies or other organizations to which you belong, and relevant hobbies. Exclude those which indicate race, disability, marital status, color, religion, sex, age, or national origin, if you prefer.

Summarize any other special training or skills: _____

What office equipment can you operate? _____

REFERENCES

List at least three references who are not related to you, preferably who would have knowledge of your work experience.

NAME	ADDRESS	PHONE	OCCUPATION
1. _____			
2. _____			
3. _____			
4. _____			

I certify that the statements made in this application are correct and complete to the best of my knowledge and belief. I understand and agree that misrepresentation, falsification or omission of material facts may be cause for rejection of my application or for termination after employment. I understand and agree that statements made in this application may be subject to verification from each of my former employers and any other persons who may have information concerning me, and I hereby release any such person from any and all liability for any damage whatsoever incurred in furnishing such information. I understand that if I am hired, my employment may be terminated at any time, with or without cause, by myself or the company.

Signature

Date Signed

Please read carefully, initial each paragraph and sign below:

_____ I hereby authorize the North Marin Community Services (NMCS) to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the NMCS any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the NMCS, my former employers and all other persons, corporations, partnerships, and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during my interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the NMCS. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the NMCS, and that no promises or representations contrary to the foregoing are binding on the NMCS unless made in writing and signed by me and the NMCS's designated representative.

Signed and agreed:

_____ Dated: _____