

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			i Salary Da		Date	te Available			
Days/Hours Available:	Are you auth	Are you authorized to work in the U.S.? YES NO							
Referred By					Are you 18 years of age or older? YES NO				
Have you ever been convicted of a fe	elony? YES	- I	NO If yes, exp	ain					
EDUCATION	•	·							
High School		L	cation						
Number of Years Completed	Did you gra	aduate?	YES NO						
College	'	l	ocation	'					
Number of Years Completed	Did you graduate?		YES NO	Degree(s) Received/S	Degree(s) Received/Subjects Studied				
Other Location			ocation						
Number of Years Completed Did you graduate?			YES NO	NO Degree(s) Received/Subjects Studied					
GENERAL									
Job Related Skills (typing, driver's lice	ense, first aic	l/cpr, etc	:.)						
Subjects of Special Study/Activities other than Religious (civic, athletic, etc.):									
REFERENCES									
Please list below three non-related p	ersonal refer	ences.							
Name					Title/Relationship				
Address					Phone				
Name					Title/Relationship				
Company/Address					Phone				
Name				Title/Relat	Title/Relationship				
Company/Address					Phone				

Watauga Opportunities provides equal employment opportunities to all employees and applicants and prohibits discrimination and harassment on any basis including race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws.

This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training.

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?				NO 🗆			
Employer				Supervisor			
Address				Phone			
Job Title	Job Title			Salary	\$		
Responsibilities							
From	То	Reason for Leaving					
May we contact	this supervisor for a	reference?	YES 🗌	NO 🗆			
Employer				Supervisor			
Address				Phone			
Job Title			Salary	\$			
Responsibilities							
From	rom To Reason for Leaving						
May we contact this supervisor for a reference?							
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:			
DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY Interviewed by/Date:							
Remarks:							
References Checked by/Date/Comments:							

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Applicant Affirmative Action Program Self Identification Form

Required Information							
Name:Date of Application:							
Position(s) for which you are applying:							
Voluntary Information							
affirmative action (EEO/AA), we must track ou race/ethnicity and the position they applied for t	to the government. We are an organization that norities to apply. For this reason, we invite you to						
Submission of this information is voluntary and adverse treatment. Responses will remain confi Department; and will be used only for the neces Action Program and reporting requirements to tidentify any specific individuals.	idential within the Human Resources sary information to include in our Affirmative						
Gender:							
Definitions of race/ethnicity are on the back of Employment Opportunity Commission).	of this page (as defined by the Equal						
Race/Ethnic Identification (check one):							
Are you Hispanic or Latino? Yes	☐ No						
If you answered "Yes" you have completed the race from the options below.	his form. If you answered "No" please select a						
☐White (Not Hispanic or Latino)							
Black or African American (Not Hispanic or Latino) American Indian or Alaska (Not Hispanic or Latino)							
Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)	☐ Two or More Races (Not Hispanic or Latino)						
Asian (Not Hispanic or Latino)	☐I do not wish to disclose.						

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.