



EMPLOYMENT APPLICATION

Date _____ Position _____

Please complete all sections of the application. A resume may be included to supplement your application. Do not substitute your resume for the information requested on the application.

LAST NAME	FIRST NAME	MIDDLE
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ADDRESS	CITY	ST	ZIP
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HOME PHONE:	CELL PHONE:
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Have you ever applied for employment with us? No Yes, when _____ Position _____

Can you provide proof, if hired, that you are eligible to work in the United States? Yes No

Have you ever been convicted of a felony? No Yes, describe _____

NOTE: Conviction of a felony may not disqualify you.

Driver's License or I.D. Number, State, Expiration Date: _____

School	Name and Location of School	Course of Study	# of Years Complete	Did you Graduate?	Degree or Diploma
Graduate					
College					
Business/ Technical					
High School					

Please complete Employment History on next page.

The information provided in this Employment Application is true, correct, and complete. If employed, any misstatement of omission of fact on this application may result in my dismissal.

I hereby understand and acknowledge that employment at the Museum is "at will" which means that either I or the Museum can terminate the employment relationship at any time, with or without notice and for any or no reason. If I am offered and accept a position to conform to all existing and future Museum rules and regulations and I understand that the Museum reserves the right to change wages, hours and working conditions as deemed necessary.

If you decide to engage an investigative consumer-reporting agency to report on my credit and personal history I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.

Signature Date

EMPLOYMENT HISTORY (Please complete all sections. Do not write "see resume" on the application. Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.)

Company Name	Telephone
Address	Employed From _____ To _____
Name of Supervisor	Hourly Rate Start _____ Last _____
State Job Title and Describe Your Work	Reason for Leaving

	May we contact this employer <input type="checkbox"/> yes <input type="checkbox"/> no

Company Name	Telephone
Address	Employed From _____ To _____
Name of Supervisor	Hourly Rate Start _____ Last _____
State Job Title and Describe Your Work	Reason for Leaving

	May we contact this employer <input type="checkbox"/> yes <input type="checkbox"/> no

Company Name	Telephone
Address	Employed From _____ To _____
Name of Supervisor	Hourly Rate Start _____ Last _____
State Job Title and Describe Your Work	Reason for Leaving

	May we contact this employer <input type="checkbox"/> yes <input type="checkbox"/> no

Company Name	Telephone
Address	Employed From _____ To _____
Name of Supervisor	Hourly Rate Start _____ Last _____
State Job Title and Describe Your Work	Reason for Leaving

	May we contact this employer <input type="checkbox"/> yes <input type="checkbox"/> no

Describe any training received relevant to the position for which you are applying.
