

Craig Chamber of Commerce

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

Date _____

Name _____

Last

First

Middle

Address _____

Street

City

State

Zip

How long at that address? _____ Social security Number: _____

Telephone _____ Cell phone _____ Email: _____

Position applying for:	Starting salary requested:	Available start date:
Do you have a driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No Driver's license # _____ State: _____ Exp. date ____/____/____		Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been convicted of any felonies during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying). <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:		
Are you willing to be drug tested if that is a requirement of employment? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Education & Training:

School	Name and address	Major/course studied	Graduated (Y or N)	Average grade
High school				
College or University				
Other				

State fully why you believe you are qualified for this position:

Interests and accomplishments:

Skills:

Please rate your skill at the following and provide a brief example of your experience with each:

1=None 2=Basic 3=Average 4=Above Average 5=Advanced

Internet research	1	2	3	4	5
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Please describe: _____

Graphic Design	1	2	3	4	5
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Please describe: _____

Customer Service	1	2	3	4	5
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Please describe: _____

Sales	1	2	3	4	5
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Please describe: _____

Written communication	1	2	3	4	5
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Please describe: _____

Verbal communication	1	2	3	4	5
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Please describe: _____

Scheduling and follow through	1	2	3	4	5
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Please describe: _____

Microsoft Word	1	2	3	4	5
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Please describe: _____

Microsoft Excel	1	2	3	4	5
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Please describe: _____

Microsoft PowerPoint/Publisher	1	2	3	4	5
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Please describe: _____

Microsoft Outlook	1	2	3	4	5
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Please describe: _____

WORK EXPERIENCE

Please list your work experience for the past five years beginning with your most recent job held. Attach additional sheets if necessary.

Company:		Street address:	
Supervisor:		Phone number:	
Position held:		May we contact: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Start date:	End date:	Start pay:	End pay:
Reason for leaving (be specific):			
Outline your job duties, skills used or learned and advancements or promotions while you worked at this company:			

Company:		Street address:	
Supervisor:		Phone number:	
Position held:		May we contact: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Start date:	End date:	Start pay:	End pay:
Reason for leaving (be specific):			
Outline your job duties, skills used or learned and advancements or promotions while you worked at this company:			

Company:		Street address:	
Supervisor:		Phone number:	
Position held:		May we contact: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Start date:	End date:	Start pay:	End pay:
Reason for leaving (be specific):			
Outline your job duties, skills used or learned and advancements or promotions while you worked at this company:			

References:

<i>Name</i>	<i>Address</i>	<i>Phone number</i>	<i>Occupation</i>

In exchange for the consideration of my job application by the Craig Chamber of, I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or Chamber of Commerce practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Craig Chamber of Commerce, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the director of the company. The Craig Chamber of Commerce may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Craig Chamber of Commerce may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Craig Chamber of Commerce permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contact.

I also understand that (1) the Craig Chamber of Commerce has a drug and alcohol policy that could require pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

Signature of applicant _____ Date: _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.