

**EAI EMPLOYMENT RESOURCES**  
**Application for Employment**

Applicant: Thank you for your interest in EAI Employment Resources.

EAI is an equal opportunity employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Please answer the questions on this form so that the application can be properly evaluated.

**(PLEASE PRINT)**

**JOB INFORMATION**

Position(s) Applied For		Date of Application
Date Available to Work	Salary/Wage Desired	Are you available to work Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> If Part Time – time of day available (circle one): Morning Afternoon Evening

**PERSONAL INFORMATION**

Last Name	First Name	Middle Name			
Address	Number	Street	City	State	Zip Code
Telephone Number(s)			Social Security Number		
Driver License #	License Issued by the State of:		Expiration Date		

How Did You Learn About Us?

<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend or Relative	<input type="checkbox"/> College/University
<input type="checkbox"/> Window Display	<input type="checkbox"/> EAI Employee Referral	<input type="checkbox"/> Industry Referral
<input type="checkbox"/> Employment Agency	Name _____	<input type="checkbox"/> Other _____

**EDUCATION**

School	Name and Address of School	Course of Study	No. of Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

**PERSONAL/PROFESSIONAL REFERENCES**

*Do not include family members or past supervisors.*

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

**WORK EXPERIENCE**

Start with your present or last job, include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status. You may attach a resume in lieu of completing this portion.

Employer	Dates Employed From                  To		Work Performed
Address			
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary Starting                  Final		
Supervisor			
Reason For Leaving	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Dates Employed From                  To		Work Performed
Address			
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary Starting                  Final		
Supervisor			
Reason For Leaving	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Dates Employed From                  To		Work Performed
Address			
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary Starting                  Final		
Supervisor			
Reason For Leaving	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Comments: Include explanation of any gaps in employment.**


**Describe any specialized training, apprenticeship, skills, and extra-curricular activities.**


**List professional, trade, business or civic activities and offices held.**

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:


**Describe any job-related training received in the United States military.**


<b>GENERAL INFORMATION</b>	<b>YES</b>	<b>NO</b>
<b>Please answer each question either “yes” or “no” or as indicated.</b>		
If you are under 18 years of age, can you provide required proof of your eligibility to work?		
Have you ever filed an application with EAI Employment Resources?		
If yes, give date(s):		
Have you ever been employed with EAI before?		
If yes, give date(s):		
Do any of your friends or relatives, other than spouse, work at EAI?		
If yes, state name, relationship and location:		
Are you currently employed?		
May we contact your present employer?		
Are you a U.S. citizen?		
If not a citizen, indicate type of Visa and Alien Registration #:		
Have you ever been convicted of an offense?		
If yes, indicate nature of offense:		
Are you currently on “lay-off” status?		
Do you have a safe and reliable automobile, with up-to-date insurance?		
Do you have access to a car during the work hours of the position for which you are applying?		
How would you rate your driving record? (Circle One)      Excellent      Good      Fair      Poor		
Do you currently have any points on your driving record? If yes, how many and for what violations?		
Violations -		
Is your driver’s license current and valid?		
Has your driver’s license ever been suspended in the past? If yes, when and for what violations?		
Violations-		
Can you provide proof of insurance?		
What are the make(s), models(s) and year(s) of all automobiles that you will be using if you are employed here?		
Vehicle Info-		
Depending on your job duties and work assignments, you may be expected to transport participants in your automobile during your workday for distances ranging anywhere from 10 to 80 miles per day. This means that you must maintain a properly always working vehicle with adequate amounts of gasoline. Do you understand that this is a part of your employment obligation if you are employed here?		
Do you believe that your vehicle(s) is/are in good condition and will be able to withstand the demands of the job you are applying for?		
Are you Department of Mental Health trained and certified? If yes can you provide a copy of your training records?		
Where is you receive your training?		
Have you ever been in the military?		
Were you honorably discharged?		

**Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the activities involved in such a job or occupation for which you have applied?    YES \_\_\_\_\_    NO \_\_\_\_\_

**SUPPLEMENTAL QUESTIONS**

What are your long-term goals?

Where do you see yourself in five years?

Please describe a significant event in your life up to this point and indicate why it is significant for you?

Why do you think we should hire you for the job that you are applying for?

**APPLICATION STATEMENT**

I certify that the answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby give EAI permission to contact the employers listed on this application (and accompanying resume, if any), unless it has been indicated that I do not want them contacted.

This application for employment shall be considered active for a period not to exceed 30 days. Any applicant wishing to be considered for employment beyond this period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at Will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

I agree to have a pre-employment drug screen and TB test, paid for by EAI at a designated clinic before my effective date of hire.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

**Applicant's Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_