



2205 Old Philadelphia Pike, Lancaster, PA 17602

Application for Employment

(Please print)

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to application and/or interview process should notify a representative of the Human Resource Department.

Position(s) applied for: _____ Date of application: _____

Name: _____

Address: _____

Telephone Number: _____ Mobile/Cell: _____

If you are under 18, and it's required, can you furnish a work permit? YES or NO

Have you ever been employed by Clark Associates before? YES or NO

Are you eligible to work in this country? YES or NO

Date available for work: _____

Type of Employment Desired? Circle One: Full-Time Part-Time Temporary Seasonal Intern

Are you able to meet the attendance requirements for the position? YES or NO

Have you been convicted of a crime in the last seven (7) years? YES or NO

If yes, please explain: _____

(Conviction will not necessarily bar you from employment. Each instance and explanation will be considered in relation to the position in which you are applying)

Employment History

Provide the following information for your past four (4) employers, assignments or volunteer activities, starting with the most recent.

<p>From: _____ To: _____ Employer: _____ Phone: _____</p> <p>Job Title: _____ Address: _____</p> <p>Immediate Supervisor/Title: _____ Summarize Nature of work performed and Job responsibilities: _____ _____</p> <p>Reason for Leaving: _____ Hourly rate/salary at start: _____ Hourly rate/Salary at end: _____</p>
<p>From: _____ To: _____ Employer: _____ Phone: _____</p> <p>Job Title: _____ Address: _____</p> <p>Immediate Supervisor/Title: _____ Summarize Nature of work performed and Job responsibilities: _____ _____</p> <p>Reason for Leaving: _____ Hourly rate/salary at start: _____ Hourly rate/Salary at end: _____</p>
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Skills & Qualifications

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Educational Background

High School: Location: Years Completed: Did you Graduate? YES or NO Course of Study: College: Location: Years Completed: Did you Graduate? YES or NO Major: Degree: Other: Location: Years Completed: Did you Graduate? YES or NO Course of Study:

References

Name: Telephone: Years known: Name: Telephone: Years known: Name: Telephone: Years known:

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service whenever it is discovered. I give the employer the right to contact and obtain information from all references, employers, educational institutions, and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information. The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law. This application is current for only sixty (60) days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application. If I am hired, I understand that I am free to resign at any time, with or without prior notice, and the employer reserves the right to terminate my employment at any time, with or without prior notice, except as required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer. I understand that it is this company's policy not to refuse to hire a qualified individual because of that person's need for reasonable accommodation as required by the ADA.

How did you hear about us? Advertisement Friend Relative Job Agency Walk-in Other

Do you have friends or relatives employed by this company? YES or NO If yes, please list name(s)

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant Date