# PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE



## APPLICATION FOR EMPLOYMENT

BASIC INFO:		DATE	E			
Name						
	Last	First	Middle		Maiden	
Address						
Number Street		City	State	Zip		
How long have you lived there			Social Security	/ No. —	_	
Telephone						
Position applied	for:		_ Days/ho	ours availab	ole to work:	
How did you hear about the position:			☐ Any ☐ Mond	ay-Thursday	7:00am - 5:30pr	m
When could you start?		Can you	Can you work nights? ☐ Yes ☐ No			
EDUCATION:	NAME OF SCHOOL		LOCATION (City, State)	DEC	GREE	
High School			(Only, Oldio)	☐ Diploma ☐ GED		
College					/Bachelor's (Professional t complete	
Other						
BACKGROUND:  HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR?						
If yes, please expla	ain.					

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DRIVING RECORD:			
DO YOU HAVE A DRIVER'S LICENSE?			
How will you get to work?   Drive Myself  Family/Friend  Bus  Bike  Other   Other			
Driver's license numberState	☐ Operator ☐ Commercial (CDL)		
Expiration date			
Have you had any accidents during the past 3 years?   Yes  No How many?			
Have you had speeding tickets during the past 3 years?   Yes No How Many?			
REFERENCES: Please list two (other than relatives of	or previous employers)		
Name	Name		
Job Title	Job Title		
Company	Company		
Address City:	Address City:		
State:	State:		
Telephone	Telephone		
<b>SKILLS:</b> Ex. Have used push mower, riding mower, e	tc. Can drive trucks with trailers attached. BE SPECIFIC.		

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MILITARY:					
HAVE YOU EVER BEEN IN THE ARMED FORCES?					
ARE YOU NOW A MEMBER OF THE NATIONAL GUAF	 RD? □	Yes No			
Specialty Date Enter		charge Date			
		<u> </u>			
Work Experience: Please list your work experience for the past five years beginning with your most recent job.  Use back of the page if necessary.					
Your job title:	Supervisor's Name	Employment dates	Pay		
Name of company:		Start			
City, StatePhone number:		End			
Reason for leaving (be specific):					
List the duties performed.					
Your job title:	Supervisor's	Employment	Pay		
Name of company:	Name	dates			
City, State		Start			
Phone number:		End			
Reason for leaving (be specific):					
List the duties performed.					
May we contact your present employer? ☐ Yes ☐ No					
Did you complete this application yourself					

#### AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with Youngstown Neighborhood Development Corporation creates an actual or implied contract of employment. I understand that, if I accept employment with Youngstown Neighborhood Development Corporation, it will be on an at-will basis. This means that either Youngstown Neighborhood Development Corporation or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing if requested by Youngstown Neighborhood Development Corporation and release Youngstown Neighborhood Development Corporation and its employees, plus other persons or companies, from any and all liability arising out of or related in any way to such testing.

I authorize Youngstown Neighborhood Development Corporation to investigate information concerning my education, employment experiences, consumer reports and all other aspects of my background relevant to my proposed employment. I release Youngstown Neighborhood Development Corporation and its employees from all liability arising from such investigation.

Your signature below indicates your agreement with the following statements:

By signing my name on the line below I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing my employment application and information.

Signature of applicant:	-	Date:

Youngstown Neighborhood Development Corporation 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 us depends solely on your qualifications.



820 Canfield Road Youngstown, Ohio 44511 Phone: 330.480.0423 Email: info@yndc.org

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# DISCLOSURE UNDER FAIR CREDIT REPORTING ACT AND CONSENT TO PROCUREMENT OF CONSUMER REPORT FOR EMPLOYMENT PURPOSES

Youngstown Neighborhood

The undersigned hereby authorizes	Development Corporation .
_	(name of company)
or it's insurance agency, JAMES & SO	NS, or it's assigns, to obtain copies of
consumer reports, including a motor vel	hicle report, pertaining to me for employment
purposes, and for use in rating and/or un	nderwriting insurance for which the above named
employer may apply, and any renewal t	hereof. I understand that in obtaining such
consumer reports, a consumer reporting	g agency may be used, and I do hereby authorize
such use.	
(Driver's Name-PRINT)	(Social Security Number)
(Drivers Signature)	(Driver's License Number)
(Date)	(Driver's License State)
	(Date of Rirth)