

Application Blank: Reading Program Facilitator - Nevada

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a resume, but all questions must be answered.

Personal Information:			
Name: (Last, Middle Initial, First)			
State:	City:	Zip Code:	Address:
Contact Information:		Date You Can Start Working:	
Position Information: Check all that apply			
Anticipated Availability:			
Available for two late afternoon sessions. (3:45 pm - 5:15 pm) <input type="checkbox"/> Yes <input type="checkbox"/> No	Available Wednesdays (8:45 am - 10:15 am) <input type="checkbox"/> Yes <input type="checkbox"/> No	Available Wednesdays (12:45 pm - 2:15 pm) <input type="checkbox"/> Yes <input type="checkbox"/> No	Available for additional hours spent working during a mutually agreed upon planning schedule. <input type="checkbox"/> Yes <input type="checkbox"/> No
Preferred Number of Weekly Hours:			
<input type="checkbox"/> 5-10 Hours <input type="checkbox"/> 10-15 Hours <input type="checkbox"/> 15-20 Hours <input type="checkbox"/> 20-25 Hours <input type="checkbox"/> 25-30 Hours <input type="checkbox"/> 30-35 Hours <input type="checkbox"/> 35-40 Hours			
Are you authorized to work in the US on an unrestricted basis?		Have you ever been convicted of a felony? (A yes does not immediately disqualify applicants)	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:	
Have you reviewed the position job description listing all essential functions of the job?		Can you perform these essential job functions with or without reasonable accommodations?	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Position Qualifications:			
Type of Education:	School Name:	Degree Type:	Address/City/State/Zip Code:
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Special Skills: Please list any skills, experiences, and/or qualifications that you believe would benefit you in the position that you are applying for.			

Volunteer Experience:

Name of Organization You Volunteered For:	Location of Organization:	Describe Your Volunteer Experience:
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Work Experience:

Job Title #1:	Start Date: (mm/dd/yyyy)	End Date: (mm/dd/yyyy)
Company Name:	Supervisor's Name:	Organization Phone Number: (Please mention if we may not contact)
City:	State:	Zip Code:
Duties:		
Reason for Leaving:		
Job Title #2:	Start Date: (mm/dd/yyyy)	End Date: (mm/dd/yyyy)
Company Name:	Supervisor's Name:	Organization Phone Number: (Please mention if we may not contact)
City:	State:	Zip Code:
Duties:		
Reason for Leaving:		

Acknowledgement of Application:

The facts I included in this application are true and complete to the best of my knowledge. I understand that if I am employed, false statements or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts in this application and release the Employer from any liability.

I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party. I understand that a digital signature holds the same legal authority as a handwritten signature.

Applicant Signature: _____

Date: _____