



EMPLOYMENT APPLICATION

1. Introductory Statement

This Application is for employment with The Carnegie Arts Center Foundation, Turlock (or the “Company”). A resume may be submitted along with this Application to provide additional information, but will not be accepted in lieu of this Application. All documents submitted with this Application will not be returned. This Application is the initial part of the employment evaluation process. If you are selected to move forward in the process, you will be contacted to schedule an in-person interview.

2. Applicant Personal Information

Full Name: _____ Are you at least 18 years old: _____

Current Address: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____ Length of Time at Current Address: _____

Previous Address: _____

Length of Time at Previous Address: _____

3. Position with Company

Position Desired: _____ Date Available to Start: _____

Regular Full-Time Position Regular Part-Time Position Temporary Position

Available to Work Overtime: Yes No

Have you ever applied to, or worked for this Company in the past? Yes No

If yes, when did you work here and what is the reason for separation? _____

Do you have any relatives who are currently working for the Company, or who have worked for the Company in the past? Yes No

If yes, list the name(s): _____

4. Applicant’s Educational Background

High School Name and Address: _____

Number of years completed: _____ Did you graduate: Yes No Year of Graduation: _____

List any Honors Received: _____

College/University: _____
Number of years completed: _____ Did you graduate: Yes No Year of Graduation: _____
Degree or Diploma: _____
List any Honors Received: _____

College/University: _____
Number of years completed: _____ Did you graduate: Yes No Year of Graduation: _____
Degree or Diploma: _____
List any Honors Received: _____

Vocational / Business School: _____
Number of years completed: _____ Did you graduate: Yes No Year of Graduation: _____
Degree, Diploma or Certification: _____
List any Honors Received: _____

5. Applicant's Experience, Training and other Qualifications

Do you have any other experience, training, qualifications, or skills that you believe make you qualified for the position you are applying for? Yes No

If yes, describe your experience, training, qualifications or skills: _____

6. Applicant's Employment History

Have you ever been terminated or asked to resign? Yes No

If yes, explain the reason(s) you were terminated or asked to resign: _____

List all present and past employment experience for the last 10 years, starting with your most recent employer.

Name of Employer: _____
Address: _____ Phone Number: _____
Type of Business: _____ Supervisor's Name: _____
Dates of Employment: from _____ to _____
Was your employment: Full-Time Part-Time Temporary

Describe your position and duties: _____

Reason for leaving: _____
May we contact this employer for a reference: Yes No

Name of Employer: _____
Address: _____ Phone Number: _____
Type of Business: _____ Supervisor's Name: _____
Dates of Employment: from _____ to _____
Was your employment: Full-Time Part-Time Temporary
Describe your position and duties: _____

Reason for leaving: _____
May we contact this employer for a reference: Yes No

Name of Employer: _____
Address: _____ Phone Number: _____
Type of Business: _____ Supervisor's Name: _____
Dates of Employment: from _____ to _____
Was your employment: Full-Time Part-Time Temporary
Describe your position and duties: _____

Reason for leaving: _____
May we contact this employer for a reference: Yes No

Name of Employer: _____
Address: _____ Phone Number: _____
Type of Business: _____ Supervisor's Name: _____
Dates of Employment: from _____ to _____
Was your employment: Full-Time Part-Time Temporary
Describe your position and duties: _____

Reason for leaving: _____
May we contact this employer for a reference: Yes No

7. Driver's License

Do you have a current valid driver's license? Yes No

If yes, License Number: _____ State of Issuance: _____ Expiration Date: _____

Do you have personal automobile insurance: Yes No

If no, explain the reason(s) you do not have insurance: _____

8. References

List 3 people who are not related to you and who have personal and current knowledge of your work performance, or any other experience, training, qualifications, or skills relevant to your qualifications for the position.

Name: _____
Address: _____
Company: _____
Work or other relationship: _____

Phone Number: _____
E-mail: _____
Position: _____
Number of Years Acquainted: _____

Name: _____
Address: _____
Company: _____
Work or other relationship: _____

Phone Number: _____
E-mail: _____
Position: _____
Number of Years Acquainted: _____

Name: _____
Address: _____
Company: _____
Work or other relationship: _____

Phone Number: _____
E-mail: _____
Position: _____
Number of Years Acquainted: _____

9. Equal Opportunity Employment

The Carnegie Arts Center Foundation, Turlock (CACF), is an equal opportunity employer. In order to provide equal employment and advancement opportunities to all individuals, CACF makes all employment decisions on the basis of individual skill, ability, performance history, merit and other relevant factors associated with job performance. CACF prohibits all employees, Managers and Owners from discriminating against any applicant or employee with respect to hiring, assignments, performance evaluations, promotion, training, disciplinary action, termination, layoffs, compensation, benefits, working conditions, or any other terms or conditions of employment, based upon race (including traits historically associated with race such as hair texture and hairstyle), color, religion (all aspects of religious beliefs, observance or practice including religious dress, clothing, grooming practices, hairstyles, etc.), sex, sexual orientation, gender (including gender identity, gender expression and transgender status), marital status, registered domestic partner status, pregnancy (including childbirth, breastfeeding or related medical condition), reproductive health decision-making, alienage, national origin (including language use restrictions and possession of a driver's license issued under Vehicle Code §12801.9), ancestry, physical or mental disability, medical condition, age, off-duty use of cannabis, citizenship or immigration status, military or veteran status, genetic information, political affiliation, position in a labor dispute, request for or use of protected leave, or any other basis protected by applicable federal, state or local law. CACF also prohibits unlawful discrimination based on the perception that anyone falls within any protected category, has or is perceived as having any protected characteristic, or is associated with a person who falls within a protected category or who has or is perceived as having any protected characteristic.

10. At-Will Employment

All employees of CACF, regardless of classification or position, are employed on an at-will basis. This means that each employee's employment is terminable at the will of the employee or the Company at any time, for any reason, with or without cause, and with or without prior notice or warning. Nothing contained in this application, CACF Employee Handbook or any other Company policies, practices, procedures, manuals, job descriptions, or documents, nor any statement by any CACF employee, shall in any way create an express or implied contract of employment, a guarantee of employment for any specific period of time, or an employment relationship that is anything other than on an at-will basis. This at-will employment policy can only be changed by a written contract signed by CACF Executive Director that expressly states the intent to modify application of this at-will employment policy with respect to a specific employee.

11. Certification

Carefully read each of the following statements. Initial by each statement to confirm that you understand and agree with each statement. If you do not understand or agree with a statement, do not include your initials.

_____ I hereby certify that I have personally completed this Application.

_____ I hereby certify that I have not knowingly withheld or misstated any information that may affect my chances for employment and that all information contained in this Application, as well as any resume

submitted along with this Application, is true and correct to the best of my knowledge. I understand that any omission or misstatement of fact orally made, made on this Application, on any document submitted in connection with this Application, or made in connection with the evaluation of my application for employment with CACF shall be grounds for rejection of this Application and/or for immediate termination if I am employed by CACF regardless of the amount of time that has passed before discovery.

_____ I hereby authorize and consent to allow CACF to thoroughly investigate my references, work history, education, other experience, training, qualifications, and skills related to my suitability for employment unless otherwise specified above. I further, authorize the references and former employers I have listed to disclose to CACF any and all letters, reports, records of commendation or disciplinary action, and other information related to my work performance, without giving me prior notice of such disclosure. In addition, I hereby expressly release and agree to hold harmless to the extent permitted by law the CACF, my references, and former employers from any and all claims, causes of action, demands, damages, and/or liabilities that I may have which arise out of or in any way relate to such investigation or disclosure.

_____ I acknowledge, understand and agree that the Company is a drug and alcohol-free, healthy and safe workplace, that all employees are required to report to work in appropriate mental and physical condition so they are able to perform their jobs in a safe and satisfactory manner, and that all of the following activities are prohibited: manufacturing, distributing, dispensing, selling, possessing, using, soliciting and/or being under the influence of any alcoholic beverage, drug (including marijuana), prescription medication, controlled substance, or any other substance which may impair an employee's ability to safely, effectively and satisfactorily perform the functions of his/her job, which may increase the potential for accidents, absenteeism, substandard performance, poor employee morale or damage the reputation of CACF, or which may endanger any person, during work hours, at any time while on the Company's property, while using the Company's property (including equipment or vehicles), or while conducting Company business at any location.

_____ I acknowledge, understand and agree that if I am hired for a position for which driving is required as part of my job duties, CACF shall have the right to transfer me to an alternative position, suspend or terminate me if my driver's license is suspended or revoked, if I fail to maintain personal automobile insurance coverage and/or if I am uninsurable under CACF's policy.

_____ I acknowledge, understand, and agree that if I am hired, either CACF or I can terminate my employment at any time, for any reason, with or without cause, and with or without prior notice or warning. I further acknowledge, understand and agree that no representative of CACF has the authority to make any assurance to the contrary other than the Executive Director, who may do so only in a written agreement which expressly states the intent to modify application of the at-will employment policy with respect my employment, if I am hired.

_____ I acknowledge, understand, and agree that appointment to any position at CACF is conditioned on verification, in compliance with Federal law, of my identity and eligibility to work in the United States.

Dated: _____

Signed: _____