

Application for Employment

ANSWER ALL QUESTIONS. INCOMPLETE APPLICATIONS WILL BE REJECTED.

This company is an equal opportunity employer. In all our employment practices, including, hiring, we are firmly committed to equal opportunity without regard to race, religion, color, sex, age, national origin, citizenship, disability or any other basis of discrimination prohibited by applicable local, state or federal law. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on such grounds.

| Name | Street Address | | | |
|--|--------------------------|-----------------------|--|--|
| City | State Zip_ | | | |
| Telephone Email _ | | DOB if under 18 | | |
| Position you are applying for | | Expected wage/salary | | |
| If hired, when could you start work? | | Are you employed now? | | |
| If so, may we contact your present employer? | [] Yes [] No | | | |
| If yes, when? Who referred you to Cope for employment? | | | | |
| Names of friends or relatives working for Cope | | | | |
| <u>AVAILABILITY</u> | | | | |
| Are you seeking full time or part time employr | ment? | | | |
| What hours are you available? | | | | |
| EDUCATION | | | | |
| High School | Subjects | studied | | |
| Did you graduate? [] Yes [] No | If no, last | grade completed | | |
| Trade School or College | Studies _ | | | |
| Did you graduate? [] Yes [] No | If no, last | grade completed | | |
| MILITARY SERVICE | | | | |
| Branch Date Entered | Discharg | ed Rank | | |
| Do you have service-related skills applicable to | o civilian employment? [|] Yes [] No | | |
| If Yes, describe | | | | |
| ADDITIONAL INFORMATION | | | | |
| List additional training or experience | | | | |
| | | | | |
| | | | | |

EMPLOYMENT HISTORY (start with most recent employer)

| Company | Job Title | | |
|---|--|--|---|
| Address | City | | State |
| Salary/Wageper | Dates Worked: From | To | |
| Still employed: [] Yes [] No Supervisor | or Telephone | | |
| Reason for leaving | | | |
| Company | Job Title | | |
| Address | City | | State |
| Salary/Wageper | Dates Worked: From | To | |
| Supervisor | Telephone | | |
| Reason for leaving | | | |
| Company | Job Title | | |
| Address | City | | State |
| Salary/Wageper | Dates Worked: From | To | |
| Supervisor | Telephone | | |
| Reason for leaving | | | |
| REFERENCES : Below give name of three persons no | t related to you, whom you h | ave known at lea | st one year. |
| NAME R | ELATIONSHIP | YRS KNOWN | PHONE |
| | | | |
| | | | |
| | | | |
| | | | |
| OTHER INFORMATION | | | |
| Have you ever been convicted of or sentenced for a | ny violation of the law? | If yes, give fu | II particulars: |
| (The existence of a criminal record does not constitu | ite an automatic bar to empl | oyment) | |
| Authorization "I certify that the facts contained in this application are true and compl this application shall be grounds for dismissal. I authorize investigation give you any and all information concerning my previous employment a participating parties from all liability for any damage that may result from Company has any authority to enter into any agreement for employme unless it is in writing by an authorized company representative. This waiver does not permit the release of use of disability-related or mother relevant federal and state laws." DATESIGNATURE | of all statements contained herein. I all and any pertinent information they may arm utilization of such information. I also not for any specified period of time, or to | so authorize references have, personal or other ounderstand and agree omake any agreement o | and employers listed above to rwise and release all that no representative of the contrary to the foregoing, |