

# THE PARKCHESTER SOUTH CONDOMINIUM, INC.

## APPLICATION FOR EMPLOYMENT

(PLEASE PRINT ALL INFORMATION)

Applications are considered for all positions without regard to race, color, religion, sex, sexual preference, national origin, age, marital status, veteran status, or the presence of a non-job related medical condition or handicap.

Position Applied For: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Referral Source:  Advertisement  Friend  Relative  Employment Agency  Walk-In  None  Other \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_ Apt. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

SS #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Home Tel. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Other Contact Tel. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

If you are under 18, can you furnish a work permit?  Yes  No  Not Applicable  
 Have you ever filed an application here before?  Yes  No If yes, give date \_\_\_\_\_  
 Have you ever been employed here before?  Yes  No If yes, give date \_\_\_\_\_

Are you employed now?  Yes  No May we contact your present employer?  Yes  No  
 Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  Yes  No  
 (Verification of employment eligibility will be required upon employment.)  
 Do you have a valid driver's license  Yes  No Are you available to work  Full-Time  Part-Time  Temporary  Weekends

Are you a Parkchester South Condominium unit owner?  Yes  No  
 Are you a tenant of a Parkchester South Condominium unit owner?  Yes  No  
 Do you have any relatives that work for Parkchester South Condominium?  Yes  No  
 Do you live within the Parkchester community?  Yes  No

Are you on lay-off and subject to recall?  Yes  No Are you a veteran of the US Military?  Yes  No   
 Have you ever been convicted of any crime?  Yes  No (Conviction will not necessarily disqualify an applicant from employment) If Yes, please explain \_\_\_\_\_

### Education

	High School	College/Technical	Graduate/Professional
School Name			
Graduated (Yes/No or completed years)			
Degree			
Major			

### Skills & Organizations

List Professional, Trade, Business or Civic Activities held (You may exclude those which indicate race, color, religion, sex, or national origin) \_\_\_\_\_  
 \_\_\_\_\_

Special Skills, Professional Licenses, other language fluency, or other qualifications you would like to list \_\_\_\_\_  
 \_\_\_\_\_

## Employment

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex or national origin. Resumes are encouraged.

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Company Name \_\_\_\_\_ Address \_\_\_\_\_

Position Held/Job Title \_\_\_\_\_ Name of Supervisor \_\_\_\_\_

Describe your work \_\_\_\_\_

Employed From \_\_\_\_\_ To \_\_\_\_\_ Company Tel. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Hourly/Weekly Wage \_\_\_\_\_

Reason For Leaving \_\_\_\_\_

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Company Name \_\_\_\_\_ Address \_\_\_\_\_

Position Held/Job Title \_\_\_\_\_ Name of Supervisor \_\_\_\_\_

Describe your work \_\_\_\_\_

Employed From \_\_\_\_\_ To \_\_\_\_\_ Company Tel. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Hourly/Weekly Wage \_\_\_\_\_

Reason For Leaving \_\_\_\_\_

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Company Name \_\_\_\_\_ Address \_\_\_\_\_

Position Held/Job Title \_\_\_\_\_ Name of Supervisor \_\_\_\_\_

Describe your work \_\_\_\_\_

Employed From \_\_\_\_\_ To \_\_\_\_\_ Company Tel. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Hourly/Weekly Wage \_\_\_\_\_

Reason For Leaving \_\_\_\_\_

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## References

Name	Occupation	Years Known	Address	Telephone

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I authorize the company to thoroughly investigate my work, personal history, driver's record and verify all information given on this application, on related papers and in interviews. I authorize all individuals, schools, and firms named therein to provide any information requested about me and release them from all liability for damages in providing this information. I understand that this application is not a contract of employment.

I certify that my answers and statements are true and understand that any falsification or willful omission shall be sufficient cause for refusal of employment or dismissal.

Signature \_\_\_\_\_ Date \_\_\_\_\_