

Employment Application

Pursuant to the Americans with Disabilities Act, please contact the CBE should you require specific aids to fully participate in the interview process. Phone: 612-872-6898 Fax: 612-872-6891 Email: cbe@cbeinternational.org

CBE is an equal opportunity employer and makes all employment decisions, including those related to recruitment, hiring, training, promotion, and recognition of individuals on the basis of their ability and job related qualifications and without regard to race, religion, color, sex, national origin, age, disability, or any other classification proscribed under applicable federal, state or local law.

PERSONAL INFORMATION Complete *all* applicable information – information left blank may disqualify the application.

Name (Full - Last, First, MI)		Today's Date	
Street Address		City	State Zip
Home Phone	Business Phone	Are you willing to work: Full Time Part Time Temporary Intermittent Weekdays Weekends Evenings Nights Overtime	
E-mail		When could you start employment?	
Position(s) applied for		Previous Volunteer Experience No Yes Date(s): Title:	
Are you legally authorized to work in the United States? Yes No		Organization./Location:	
Have you previously been employed by or ever applied for internships or employment with CBE? No Yes Explain:			

EMPLOYMENT HISTORY (List below last three employers, starting with the most recent one first)

Present or Last Position	Name of Company		From Mo/Yr	To Mo/Yr
Street Address		City	State	Zip
Duties		Reason for Leaving		
Starting Salary/Wages	Final Salary/Wages	Bonus	Commission	May we contact your supervisor?
Name of Supervisor		Title and Department of Supervisor		Phone Number of Supervisor
Next Previous Position	Name of Company		From Mo/Yr	To Mo/Yr
Street Address		City	State	Zip
Duties		Reason for Leaving		
Starting Salary/Wages	Final Salary/Wages	Bonus	Commission	May we contact your supervisor?
Name of Supervisor		Title and Department of Supervisor		Phone Number of Supervisor
Next Previous Position	Name of Company		From Mo/Yr	To Mo/Yr
Street Address		City	State	Zip
Duties		Reason for Leaving		
Starting Salary/Wages	Final Salary/Wages	Bonus	Commission	May we contact your supervisor?
Name of Supervisor		Title and Department of Supervisor		Phone Number of Supervisor

Have you been discharged from any job within the last five year? No Yes, explain:

Have you quit after being notified that you would be terminated? No Yes, explain:

EDUCATION INFORMATION Use back of page if needed

High School or GED	Address	City	State	Degree	Course of study	
College	Address	City	State	Degree	Major	GPA
College	Address	City	State	Degree	Major	GPA
Graduate School	Address	City	State	Degree	Major	GPA
Other	Address	City	State	Degree	Major	GPA

Work Related References Please list three work-related references.

Employer	Supervisor	City	State	Phone number or e-mail
Employer	Supervisor	City	State	Phone number or e-mail
Employer	Supervisor	City	State	Phone number or e-mail

I give CBE permission to phone my references. Signature: _____ Date: _____

Have you ever been convicted of a felony? (Do not refer to traffic citations.) Criminal conviction does not constitute an automatic bar to employment. Convictions will only be considered in relation to specific job requirements. It is only necessary to include convictions which have not been expunged from the records. No Yes, explain: Use back of page if needed

Court & Location: _____

Have you ever been disbarred or otherwise lost a license to practice your profession? No Yes, explain. Use back of page if needed: _____

GENERAL

Use the following space to list other qualifications pertinent to the position for which you are applying: (awards, specialized training, etc.) Use back of page if necessary.

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY

- In consideration of my employment, I agree to conform to the policies and procedures of CBE. I understand that in accepting this application, the company is in no way obligated to provide me with employment and that I am not obligated to accept employment if offered. Furthermore, if employed, I understand that I am employed at will and that my employment and compensation can be terminated with or without cause, and with or without notice at any time.
- I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any falsified statements or omission of fact on either this application or during the pre-employment process will result in my application being rejected, or, if I am hired, in my employment being terminated.
- I also understand that any offer of employment is conditioned on the completion of pre-employment tests and documentation, including satisfactory reference checks. I will, upon request, sign all necessary consent forms.
- I authorize CBE to investigate any information, including my employment history, educational background, credit history and record of criminal convictions that it believes is relevant to my employment application. My former employers, education institutions, and personal references may provide information that they may have about me in response to inquiry from CBE.

Applicant Signature	Date
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HUMAN RESOURCES APPROVAL

Signature of Hiring Department Supervisor	Date
Signature of CBE Executive	Date